

**State of New Hampshire
Department of Health and Human Services**

REQUEST FOR APPLICATION (RFA) #16-DHHS-BDAS-GCF-RFA-02

FOR

Peer Recovery Support Services (PRSS)
Facilitating Organization

February 5, 2016

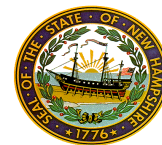


Table of Contents

1	INTRODUCTION.....	3
1.1	Purpose and Overview	3
1.2	Background	4
1.3	Request for Application Terminology	5
1.4	Contract Period	6
1.5	Contract Value.....	6
2	STATEMENT OF WORK.....	6
3	SCHEDULE OF EVENTS	8
3.1	Timetable	8
3.2	Vendor Questions	8
3.3	Answers to Vendor Questions	9
3.4	Application Due Date	9
4	TERMS OF SUBMISSION.....	9
4.1	Property of the Department.....	9
4.2	Addendum	9
4.3	Application Submittals	10
4.4	Application Receipt and Opening.....	10
4.5	Award Consideration	10
4.6	Notification & Award of Contracts.....	10
4.7	Contract Negotiations and Unsuccessful Vendor Notice.....	10
4.8	Protest of Intended Award.....	11
4.10	License, Certificates and Permits as Required	11
4.11	Affiliations – Conflict of Interest	11
4.12	Applicant’s Financial Condition.....	11
4.13	Required Attachments.....	12
5	INSTRUCTIONS FOR SUBMISSION	13
5.1	Application Submission, Deadline, and Location Instructions.....	13
5.2	Application Submission Format	13
6	RFA EVALUATION PROCESS	14
6.1	Application Scoring	14
6.2	Scoring Detail.....	14
7	Culturally and Linguistically Appropriate Standards.....	16
8	MANDATORY BUSINESS SPECIFICATIONS.....	18
8.1	Contract Terms, Conditions and Penalties, Forms	18
9	ADDITIONAL INFORMATION.....	19
9.1	Appendix A - Exceptions to Terms and Conditions.....	19
9.2	Appendix B – Contract minimum requirements	19
9.3	Appendix C – Scope of Services	19
9.4	Appendix D – Regional Public Health Networks	19
9.5	Appendix E – CLAS Requirements.....	19



1 INTRODUCTION

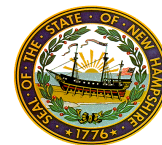
1.1 Purpose and Overview

This Request for Applications is published to solicit applications from organizations to facilitate the development and networking of Peer Recovery Support Services available through Recovery Community Organizations (RCOs) in a minimum of five (5) Regional Public Health Regions (See Appendix D) in order to significantly reduce alcohol and drug misuse and its social, behavioral and health consequences, statewide.

The Department is seeking a vendor to provide the following tasks and/or services:

- Subcontract with at least five (5) Recovery Community Organizations (RCOs).
- Assess the RCOs status/readiness to deliver Peer Recovery Support Services (PRSS) according to standards set by the Council of Accreditation of Peer Recovery Support Services (CAPRSS).
- Determining RCOs ability to establish a Recovery Center.
- Develop individual RCO training, technical assistance and back office functional support plan.
- Provide training and technical assistance toward RCO accreditation, workforce development and certification, and the establishment of a Recovery Center.
- Provide on-going back office functions to RCOs as needed or indicated.
- Provide program management, oversight and quality improvement processes.
- Encourage communication and cooperation among RCOs through a "Community of Practice"
- Provide technical assistance to contracted RCOs to enroll in Medicaid upon the establishment of a "Peer Recovery Program" provider type by the New Hampshire Medicaid Program based on Federal Center for Medicaid and Medicare Services (CMS) and other Federal and State requirements.
- Assist RCOs to engage with Regional Public Health Network continuum of care development work.

The Department is seeking a vendor to be the Facilitating Organization for Peer Recovery Support Services that are available in Recovery Community Organizations within at least five different Regional Public Health regions.



1.2 Background

Peer Recovery Support Services (PRSS) are part of the Department's overall strategy to respond to substance misuse issues that negatively impact the New Hampshire citizens, families and communities. The need to respond is heightened by the opioid epidemic, which caused 325 opioid deaths in 2014 and is trending for a significant increase in that number for 2015.

The Department's goal is to create a statewide, geographically diverse PRSS network by increasing capacity through the development and support of Recovery Community Organizations (RCOs) in at least five (5) of the thirteen (13) Public Health Regions.

It is the intention of the Department and the Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment and Recovery (Governor's Commission) to ensure financial, operational, and technical assistance and training that will support Recovery Community Organizations (RCOs) in each of the thirteen (13) Regional Public Health Networks in the state.

Recognizing that there are not adequate funds available at this time to meet the intention, the Department is seeking a Facilitating Organization that will contribute to the initial costs for developing and delivering Peer Recovery Support Services (PRSS) through subcontracts with Recovery Community Organizations (RCOs). RCOs will be expected to leverage additional public and private resources against the resources offered through the resulting contract.

Significant work has taken place toward the development of PRSS and RCOs through a number of initiatives and projects, which includes the ongoing engagement of representatives from the recovery community in all planning conversations. These initiatives and projects included:

- "Bringing Recovery Supports to Scale Technical Assistance Center Strategy" (BRSS TACS) – A federally funded initiative project that enabled the Department to bring together representatives from recovery organizations, substance misuse agencies, mental health agencies, health care agencies and state government agencies to identify priorities and develop a plan to support PRSS development across the state.
- The engagement of additional partners, including the Recovery Task Force of the Governor's Commission, in work groups that researched funding, peer competencies, policies and procedures, and other relevant information that are being used in PRSS development.
- The initiation by the Department (through the NH Center for Excellence at the Community Health Institute) of a statewide PRSS survey that identified twenty (20) potential PRSS organizations at varying levels of readiness to initiate services. The survey results will help direct PRSS FO work with RCOs.



The resulting contract will continue and advance the PRSS and RCO development work completed in previous initiatives and projects. The selected vendor will coordinate and collaborate with other Department contractors to avoid duplication of effort and to take advantage of other initiatives and capacities already developed to support this work.

1.3 Request for Application Terminology

RFA – Request for Applications

DHHS – Department of Health & Human Services

RCO - Recovery Community Organizations – independent organizations with nonprofit status that is led and governed by representatives of local substance use disorder (SUD) recovery communities. RCO's must have a demonstrated history and expertise in providing peer led recovery support services, or their board has confirmed by certificate of vote their desire to establish expertise to provide peer-led recovery support services. The RCO must have a governing board comprised of at least 50 percent of people in recovery from substance use disorders (SUDs) or substance use and co-occurring disorders (COD), and family members of people in recovery.

Recovery Center –peer-run community facility where PRSS and other recovery supports are offered.

PRSS – Peer Recovery Support Services –Peer Recovery Coaching and Telephone Recovery Support services provided by qualified individuals with recovery experience in order to help individuals gain and sustain recovery from substance use disorders.

Peer Recovery Coaching – A service provided by trained peers who serve as guides and mentors to individuals seeking or already in recovery in order to assist individuals with removing obstacles and barriers to recovery.

CRSW - Certified Recovery Support Worker - A Certified Recovery Support Worker is an individual certified by the NH Licensing Board of Alcohol and Other Drug Use Professionals to provide recovery support services pursuant to RSA 330-C (<http://www.gencourt.state.nh.us/rsa/html/XXX/330-C/330-C-mrg.htm>) and the associated administrative rules.

Telephone Recovery Support Services – Scheduled and as needed telephone calls that provide peer to peer support and encouragement, as well as information about community resources; 12-step meetings; and other supports that may be available to individuals who are seeking or in recovery.

Regional Public Health Networks – Thirteen (13) partnerships used for public health planning and the delivery of selected public health services (<http://nhphn.org>). See Appendix C

Regional Public Health Continuum of Care Development – The Department has contracted with RPHNs to engage the community to develop coordinated capacity for SUD prevention, intervention, treatment and recovery supports.



SUD – Substance Use Disorder – The recurrent use of alcohol and/or drugs causes clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities at work, school, or home as defined by the DSM-5

NH Center for Excellence at the Community Health Institute – An agency under contract with the Department to provide training, technical assistance, program evaluation, data analysis and interpretation, and support to the alcohol and drug workforce.

Qualified Health Plan – An insurance plan which is certified by the NH insurance marketplace and which is included in the NH DHHS's Premium Assistance Program.

Medicaid Managed Care Organization – A Medicaid health plan that provides client care management through a system of qualified services providers.

1.4 Contract Period

The Contract resulting from this RFP will be effective upon Governor & Executive Council approval through June 30, 2017.

The Department may extend contracted services for up to four (4) years, contingent upon satisfactory vendor performance, continued funding and Governor and Executive Council approval.

1.5 Contract Value

All obligations of the State are contingent upon receipt of federal funds awarded through the Catalog of Federal Domestic Assistance (CFDA) #93.959, U.S. Department of Health & Human Services, Substance Abuse and Mental Health Services Administration, Substance Abuse Block Grant (<https://www.cfda.gov/>) and funds made available through the Governor Commission on Alcohol and Drug Abuse Prevention, Treatment and Recovery.

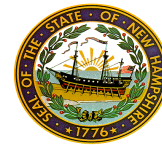
The Department shall award one (1) contract with a total value of **\$1,450,000**, of which:

- \$362,500 will be available to the selected vendor for contract administration.
- \$937,500 will be available for RCO operational costs.
- \$150,000 will be available for PRSS client service reimbursement.

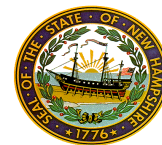
2 STATEMENT OF WORK

2.1 The selected Vendor must conduct an assessment of Recovery Community Organizations (RCOs) to determine the level of readiness for each RCO to become accredited according to the standards set forth by the Council on Accreditation of Peer Recovery Support Services (CAPRSS).

2.2 The selected Vendor must determine the level of readiness for accreditation for each RCO based on factors identified in Exhibit C, Scope of Services.



- 2.3 The selected Vendor must enter into contract with a minimum of five (5) Recovery Community Organizations in five (5) different Public Health Regions (See Appendix D, Regional Public Health Networks), as approved by the Department, in order to increase capacity for Peer Recovery Support Services (PRSS) within each of the selected five (5) Recovery Community Organizations.
- 2.4 The selected Vendor must collaborate with the Council on Accreditation of Peer Recovery Support Services (CAPRSS) to provide each RCO with assistance to meet accreditation standards set forth by the CAPRSS.
- 2.5 The selected Vendor must collaborate with other PRSS technical assistance assets to assess the capacity of each RCO relative to the core and optional standards defined by the Council of Accreditation of Peer Recovery Support Services (CAPRSS).
- 2.6 The selected Vendor must provide technical assistance to contracted RCOs to enroll in Medicaid upon the establishment of a "Peer Recovery Program" provider type by the New Hampshire Medicaid Program based on Federal Center for Medicaid and Medicare Services (CMS) and other Federal and State requirements
- 2.7 The selected Vendor must develop a written plan for each RCO that will enable the RCO to meet accreditation standards. The plan must include, but is not limited to, training and technical assistance.
- 2.8 The selected Vendor must assess the ability of each RCO to open and sustain a Recovery Center.
- 2.9 The selected vendor must provide personnel to perform back office functions that may include, but are limited to:
 - 2.9.1 Human resource functions.
 - 2.9.2 Financial functions, which may include but are not limited to accounting, bookkeeping and payroll.
 - 2.9.3 Billing functions.
- 2.10 The selected Vendor will be responsible for PRSS billing functions as well as reimbursement of certain RCO operational costs.
- 2.11 The selected Vendor must work with the Department and RCOs to determine culturally appropriate process and outcome data collection and analysis.
- 2.12 The selected vendor must work with the Center for Excellence to develop and provide training as well as technical assistance to Recovery Community Originations in order to:
 - 2.12.1 Assist RCOS attain accreditation.



- 2.12.2 Ensure personnel providing PRSS are Certified Recovery Support Workers (CRSW) and meet CAPRSS recovery coaching standards.
- 2.12.3 Assist RCOs to expand capacity to include Peer Recovery Coaching and Telephone Recovery Support Services.
- 2.12.4 Assist RCOs with expanding capacity to include back office functions.
- 2.12.5 Assist RCOs establish and sustain a Recovery Center.
- 2.13 The selected vendor must provide program management and oversight as well as implement a quality improvement process.
- 2.14 The selected Vendor must facilitate a Community of Practice that allows RCO administrators and leaders to establish and strengthen collegiality, cooperation, collaboration, and informal mentoring among RCOs, utilizing logistical support provided by the Center for Excellence.
- 2.15 The selected Vendor must ensure that each RCO connects with and engages in its RPHN continuum of care development work.
- 2.16 The selected Vendor must work with the Department to identify the next cohort of RCOs to assist them in preparing for CAPRSS accreditation.
- 2.17 In addition to the services/deliverables identified within this RFA, the selected vendor must provide all services specified in Appendix C - Scope of Services.
- 2.18 Vendors responding to this RFA **must provide**:
 - 2.18.1 All items listed in Section 4.12, Required Attachments; AND
 - 2.18.2 Response to Questions 1 through 9 in Section 6, RFA Evaluation Process.

3 SCHEDULE OF EVENTS

3.1 Timetable

EVENT	DATE
RFA released date	02/05/2016
Vendor Questions Due	02/19/2016
Answers to Vendor Questions Posted	02/24/2016
Application Due Date	4:00 PM EST 03/04/2016

3.2 Vendor Questions

- 3.2.1 All questions about this RFA, including but not limited to requests for clarification, additional information or any changes to the RFA must be made in writing, citing the RFA page number and part or subpart, and submitted to the Procurement Coordinator identified in Section 5.1.



- 3.2.2 DHHS may consolidate or paraphrase questions for efficiency and clarity. Questions that are not understood will not be answered. Statements that are not questions will not receive a response.
- 3.2.3 DHHS will not acknowledge receipt of questions.
- 3.2.4 The questions may be submitted by fax or e-mail; however, DHHS assumes no liability for assuring accurate and complete fax and e-mail transmissions.
- 3.2.5 Questions must be received by the deadline given in Section 3.1 Timetable.

3.3 Answers to Vendor Questions

DHHS intends to issue responses to properly submitted questions by the deadline specified in Section 3.1 Timetable. Written answers will be posted on the DHHS Public website (<http://www.dhhs.nh.gov/business/rfp/index.htm>). This date may be subject to change at DHHS's discretion.

3.4 Application Due Date

- 3.4.1 All Application submissions must be received at the Department of Health and Human Services no later than the date and time specified in Section 3.1, Timetable. Submissions received after the date and time specified will be marked as late and will not be eligible for consideration in the evaluation process. There will be no exceptions to this requirement.
- 3.4.2 All offers shall remain valid for a period of two hundred forty (240) days from the Application Due Date. A vendor's disclosure or distribution of Applications other than to the Department of Health and Human Services will be grounds for disqualification. No more than one (1) Application per response should be submitted.

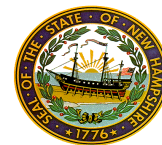
4 TERMS OF SUBMISSION

4.1 Property of the Department

All material received in response to this RFA shall become the property of the Department of Health and Human Services (DHHS) and will not be returned to the Vendor. Regardless of the Vendors selected, DHHS reserves the right to use any information presented in a Application response. The content of each Vendor's Application shall become public information once a contract has been awarded.

4.2 Addendum

In the event it becomes necessary to add or revise any part of this Application prior to the scheduled Application Due Date, the Department of Health and Human Services shall post any Addenda on its website. It is a Vendor's responsibility to access the website to ensure no bidding opportunity or addenda



are overlooked which may impact this Application
(<http://www.dhhs.nh.gov/business/rfp/index.htm>).

4.3 Application Submittals

Application submittals must be marked as:

Peer Recovery Support Services (PRSS) Facilitating Organization
(RFA) #16-DHHS-BDAS-GCF-RFA-02

4.4 Application Receipt and Opening

To preserve the integrity of the procurement process, Applications will not be made public at the time of Application opening.

4.5 Award Consideration

4.5.1 The contract award shall be based upon:

4.5.1.1 A Vendor's Application Scores.

4.5.1.2 The Department's evaluation of Vendor responses to mandatory questions.

4.5.1.3 Compliance with all terms and conditions of this Request for Application (RFA).

4.5.2 The State reserves the right to cancel all or any part of this RFP at any time. Cancellation of this RFA, in whole or in part, shall not bar the State from issuing an RFA for the same services or from purchasing the same services through other means.

4.5.3 Any agreement(s) that may result from this RFA shall not be binding on either party until the contract is approved by the NH Governor and Executive Council.

4.6 Notification & Award of Contracts

4.6.1 Department of Health and Human Services shall provide written notification to a Vendor who is awarded a contract relative to this RFA. Public announcements or news releases pertaining to any contract awarded shall not be made without the written permission of DHHS.

4.6.2 Results of this procurement will not be given by telephone. Application results will be made public at the time of contract award, which occurs upon the approval of NH Governor and Executive Council. Application results may be viewed on line at <http://www.dhhs.nh.gov/business/rfp/index.htm>.

4.7 Contract Negotiations and Unsuccessful Vendor Notice

4.7.1 If a Bidder(s) is selected, the State will notify the Successful Bidder(s) in writing of their selection and the State's desire to enter into contract negotiations. Until



the State successfully completes negotiations with the selected Bidder(s), all submitted Proposals remain eligible for selection by the State. In the event contract negotiations are unsuccessful with the selected Bidder(s), the evaluation team may recommend another Bidder(s).

- 4.7.2 In order to protect the integrity of the bidding process, notwithstanding RSA 91-A:4, no information shall be available to the public, or to the members of the general court or its staff, concerning specific responses to requests for bids (RFBs), requests for proposals (RFPs), requests for applications (RFAs), or similar requests for submission for the purpose of procuring goods or services or awarding contracts from the time the request is made public until the closing date for responses except that information specifically allowed by RSA 21-G:37.

4.8 Protest of Intended Award

Any protests of intended award or otherwise related to the RFA, shall be governed by the appropriate State requirements and procedures and the terms of this RFA. In the event that a legal action is brought challenging the RFA and selection process, and in the event that the State of New Hampshire prevails, the Vendor agrees to pay all expenses of such action, including attorney's fees and costs at all stages of litigations. Legal action shall include administrative proceedings.

4.9 Contingency

Aspects of the award may be contingent upon changes to State or federal laws and regulations.

4.10 License, Certificates and Permits as Required

This may include a Certificate of Good Standing or assurance of obtaining registration with the New Hampshire Office of the Secretary of State, if the Vendor is a business entity. This also includes required licenses and/or permits to provide services as described in Section 2 of this RFA.

4.11 Affiliations – Conflict of Interest

The Vendor must include a statement regarding any and all affiliations that might result in a conflict of interest. Explain the relationship and how the affiliation would not represent a conflict of interest.

4.12 Applicant's Financial Condition

- 4.12.1 The organization's financial solvency will be evaluated. The Bidder's ability to demonstrate adequate financial resources for performance of the contract or the ability to obtain such resources as required during performance under this contract will be considered.
- 4.12.2 Each Bidder must submit audited financial statements for the four (4) most recently completed fiscal years that demonstrate the Bidder's organization is in sound financial condition. Statements must include a report by an independent auditor that expresses an unqualified or qualified opinion as



to whether the accompanying financial statements are presented fairly in accordance with generally accepted accounting principles. A disclaimer of opinion, an adverse opinion, a special report, a review report, or a compilation report will be grounds for rejection of the proposal.

4.12.3 Complete financial statements must include the following:

- 4.12.3.1 Opinion of Certified Public Accountant
- 4.12.3.2 Balance Sheet
- 4.12.3.3 Income Statement
- 4.12.3.4 Statement of Cash Flow
- 4.12.3.5 Statement of Stockholder's Equity of Fund Balance
- 4.12.3.6 Complete Financial Notes
- 4.12.3.7 Consolidating and Supplemental Financial Schedules

4.12.4 A Bidder, which is part of a consolidated financial statement, may file the audited consolidated financial statements if it includes the consolidating schedules as supplemental information. A Bidder, which is part of a consolidated financial statement, but whose certified consolidated financial statements do not contain the consolidating schedules as supplemental information, shall, in addition to the audited consolidated financial statements, file unaudited financial statements for the Bidder alone accompanied by a certificate of authenticity signed by an officer of the corporation, partner, or owner under penalty of unsworn falsification which attests that the financial statements are correct in all material respects.

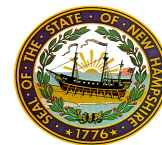
4.12.5 If a bidder is not otherwise required by either state or federal statute to obtain a certification of audit of its financial statements, and thereby elects not to obtain such certification of audit, the bidder shall submit as part of its proposal:

- 4.12.5.1 Uncertified financial statements; and
- 4.12.5.2 A certificate of authenticity which attests that the financial statements are correct in all material respects and is signed by an officer of the corporation, partner, or owner under penalty of unsworn falsification.

4.13 Required Attachments

The following are required statements that must be included with the Application. The Vendor must complete the correlating forms found in the RFA Appendices/Exhibits and submit them as the "Required Attachments" section of the Application.

Vendor Information and Declarations will include:



- Exceptions to Terms and Conditions Appendix A
- CLAS Requirements- Appendix E
- Statement of Applicant's Financial Condition

NOTE: Appendix B and D are reference documents ONLY.

DO NOT return Appendix B, C or D.

5 INSTRUCTIONS FOR SUBMISSION

5.1 Application Submission, Deadline, and Location Instructions

Applications submitted in response to this RFA must be received by the Procurement Coordinator listed below according to the schedule listed in Section 3.1 Timetable.

Procurement Coordinator Contact information

Department of Health & Human Services
Denise Sherburne
Contracts and Procurements Unit
129 Pleasant Street, Concord, NH.
Phone: (603) 271-9540
Email: Dsherburne@dhhs.state.nh.us

5.2 Application Submission Format

5.2.1 Vendors are permitted to submit only one (1) Application in response to this RFA. All Applications submitted in response to this RFA must consist of:

5.2.1.1 One (1) original and four (4) clearly identified copies of the Application, including all required attachments,

5.2.1.2 One (1) original Application Transmittal Letter signed by an official authorized to legally bind the Vendor, which shall be marked "ORIGINAL."

5.2.1.3 One (1) electronic copy on CD ROM in Microsoft WORD format

5.2.2 Applications shall contain the following sections in sequence:

5.2.2.1 Application Transmittal Letter

5.2.2.2 Table of Contents

5.2.2.3 Description of Organization

5.2.2.4 Mission Statement

5.2.2.5 Answers to Questions 1 through 9.

5.2.2.6 Required attachments identified in Section 4.12.



5.2.2.7 Appendices: Any supporting documentation the Vendor deems necessary to clarify the Application

5.2.2.8 Licenses, Certificates and Permits, as required.

5.2.3 The original and all copies shall be bound separately, delivered in sealed containers, and permanently marked as indicated above. A Vendor's disclosure or distribution of its Application other than to the State will be grounds for disqualification.

6 RFA EVALUATION PROCESS

6.1 Application Scoring

6.1.1 The award will be made to the Vendor submitting the highest scoring, qualified Application that meets the specifications of the RFA. Scoring will be based on:

6.1.1.1 Experience.

6.1.1.2 Capacity.

6.1.1.3 Demonstrated Ability to Provide all elements included in the Scope of Services.

6.1.1.4 Demonstrated Capability to Provide all elements included in the Scope of Services.

6.1.2 If the State determines to make an award, the State will issue an Intent to Award notice to a Vendor based on these evaluations. Should the State be unable to reach agreement with the selected Vendor during Contract discussions, the State may then undertake Contract discussions with the second preferred Vendor and so on. Such discussions may continue at the sole option of the State, until an agreement is reached, or all Applications are rejected.

6.1.3 The State will use a scoring scale of six hundred (600) points, which will be applied to the Application as a whole. Points will be distributed among the following factors:

100 points Vendor Experience
200 points Vendor Capacity
100 points Vendor Demonstrated Ability
200 points Vendor Demonstrated Capability
<hr/> 600 points Total Possible Score

6.2 Scoring Detail

6.2.1 **Scoring of Vendor Experience** - Vendor's experience will be allocated a maximum score of 100 points. The Vendor must establish experience as a project manager from design to implementation. To receive a maximum



score the Vendor must demonstrate experience through narrative description of its experience as a project manager. The Vendor must provide three references for past performance.

6.2.1.1 Question 1 of 9 – Briefly describe your experience with developing large projects and planning large scale project implementation.

6.2.1.2 Question 2 of 9 – Provide three (3) references of individuals or companies for whom you have provided similar services. For each reference, the Vendor must provide:

- Name of Company/Establishment
- Dates of Performance
- Customer Point of Contact (Name, Title, Phone Number and E-Mail Address)
- Testimonials from references are not required.

6.2.2 Scoring Vendor Capacity - Vendor's capacity will be allocated a maximum score of 200 points. The Vendor must demonstrate the capacity to perform all services requested in this RFA, including Appendix C.

6.2.2.1 Question 3 of 9 – Describe, in narrative form, your capacity to perform the entire scope of work outlined in this RFA, including Appendix C.

6.2.2.2 Question 4 of 9 – Describe, in narrative form, your networking experience, including how the NH Center for Excellence at the Community Health Institute has influenced networking activities.

6.2.2.3 Question 5 of 9 – Provide, in narrative form, your understanding of how the scope of work in this RFA, including Appendix C – Scope of Services, aligns with development of the Regional Public Health Network continuum of care.

6.2.3 Scoring of Vendor Demonstrated Ability - Vendor's demonstrated ability will be allocated a maximum score of 100 points. Vendor must identify specific staff that will manage the project and provide services described in this RFA, including Appendix C.

6.2.3.1 Question 6 of 9 – Outline and specifically name professional resources that will provide resources to complete the scope of work.



- Provide the Curriculum Vitae or Resume of the Project Manager.
- Provide Curricula Vitae or Resumes of each individual performing key functions identified in this RFA, including Appendix C.

6.2.4 Scoring of Vendor Demonstrated Capability - Vendor's demonstrated capability will be allocated a maximum score of 200 points. Vendor must provide a specific timeline for services described in this RFA, including Appendix C.

6.2.4.1 Question 7 of 9 – Provide a specific timeline for the following milestones:

- Report on RCO readiness
- Initial assessment of each subcontracted RCO.
- Developing a written plan for accreditation.
- Providing training and technical assistance to RCOs.
- Initial assessment for Recovery Center readiness.
- Training RCOs in billing functions.
- Initial meeting of RCO Community of Practice.

6.2.4.2 Question 8 of 9 – Identify barriers to reach the milestones according to the timeline provided in Section 6.2.4.1.

6.2.4.3 Question 9 of 9 – Provide your plan to overcome each barrier identified in Section 6.2.4.2.

7 Culturally and Linguistically Appropriate Standards

7.1 The New Hampshire Department of Health and Human Services (DHHS) is committed to reducing health disparities in New Hampshire. DHHS recognizes that culture and language can have a considerable impact on how individuals access and respond to health and human services. Culturally and linguistically diverse populations experience barriers in their efforts to access services. As a result, DHHS is strongly committed to providing culturally and linguistically competent programs and services for its clients, and as a means of ensuring access to quality care for all. As part of that commitment DHHS continuously strives to improve existing programs and services, and to bring them in line with current best practices.

7.2 DHHS requires all contractors and sub-recipients to provide culturally and linguistically appropriate programs and services in compliance with all applicable federal civil rights laws, which may include: Title VI of the Civil Rights Act of



1964, the Americans with Disabilities Act of 1990, the Age Discrimination Act of 1975, and the Rehabilitation Act of 1973. Collectively, these laws prohibit discrimination on the grounds of race, color, national origin, disability, age, sex, and religion.

7.3 There are numerous resources available to help recipients increase their ability to meet the needs of culturally, racially and linguistically diverse clients. Some of the main information sources are listed in the Bidder's Reference Guide for Completing the Culturally and Linguistically Appropriate Services Section of the RFA, and, in the Vendor/RFA section of the DHHS website.

7.4 A key Title VI guidance is the National Standards for Culturally and Linguistically Appropriate Services in Health Care (CLAS Standards), developed by the U.S. Department of Health and Human Services in 2000. The CLAS Standards provide specific steps that organizations may take to make their services more culturally and linguistically appropriate. The enhanced CLAS standards, released in 2013, promote effective communication not only with persons with Limited English Proficiency, but also with persons who have other communication needs. The enhanced Standards provide a framework for organizations to best serve the nation's increasingly diverse communities.

7.5 Applicants are expected to consider the need for language services for individuals with Limited English Proficiency as well as other communication needs, served or likely to be encountered in the eligible service population, both in developing their budgets and in conducting their programs and activities.

7.6 Successful applicants will be:

7.6.1 Required to submit a detailed description of the language assistance services they will provide to LEP persons to ensure meaningful access to their programs and/or services, within 10 days of the date the contract is approved by Governor and Council;

7.6.2 Monitored on their Federal civil rights compliance using the Federal Civil Rights Compliance Checklist, which can be found in the Vendor/RFA section of the DHHS website.

7.7 The guidance that accompanies Title VI of the Civil Rights Act of 1964 requires recipients to take reasonable steps to ensure meaningful access to their programs and services by persons with Limited English Proficiency (LEP persons). The extent of an organization's obligation to provide LEP services is based on an individualized assessment involving the balancing of four factors:

7.7.1 The number or proportion of LEP persons served or likely to be encountered in the population that is eligible for the program or services (this includes minor children served by the program who have LEP parent(s) or guardian(s) in need of language assistance);



- 7.7.2 The frequency with which LEP individuals come in contact with the program, activity or service;
- 7.7.3 The importance or impact of the contact upon the lives of the person(s) served by the program, activity or service;
- 7.7.4 The resources available to the organization to provide language assistance.

7.8 Applicants are required to complete the TWO (2) steps listed in the Appendix C to this RFA, as part of their application. Completion of these two items is required not only because the provision of language and/or communication assistance is a longstanding requirement under the Federal civil rights laws, but also because consideration of all the required factors will help inform applicants' program design, which in turn, will allow applicants to put forth the best possible application.

7.9 For guidance on completing the two steps in Appendix C, please refer to Bidder's Reference Guide for Completing the Culturally and Linguistically Appropriate Services Addendum of the RFA, which is posted on the DHHS website. <http://www.dhhs.nh.gov/business/forms.htm>

8 MANDATORY BUSINESS SPECIFICATIONS

8.1 Contract Terms, Conditions and Penalties, Forms

- 8.1.1 The State of New Hampshire sample contract is attached; Vendor to agree to minimum requirements as set forth in the Appendix B. Appendix B is provided as a reference ONLY. Vendors should not complete or return Appendix B.
- 8.1.2 The Department and the Contractor agree that the actual damages that the Department will sustain in the event the Vendor fails to maintain the required performance standards throughout the life of the contract will be uncertain in amount and difficult and impracticable to determine. The Contractor acknowledges and agrees that any failure to achieve required performance levels by the Contractor will more than likely substantially delay and disrupt the Department's operations. Therefore the parties agree that liquidated damages shall be determined as part of the contract specifications.
- 8.1.3 Assessment of liquidated damages shall be in addition to, and not in lieu of, such other remedies as may be available to the Department. Except and to the extent expressly provided herein, the Department shall be entitled to recover liquidated damages applicable to any given incident.
- 8.1.4 The Department will determine compliance and assessment of liquidated damages as often as it deems reasonable necessary to ensure required performance standards are met. Amounts due the State as liquidated



damages may be deducted by the State from any fees payable to the Contractor and any amount outstanding over and above the amounts deducted from the invoice will be promptly tendered by check from the Contractor to the State.

- 8.1.5 The State intends to negotiate with the awarded vendor to include liquidated damages in the Contract in the event any deliverables are not met.

9 ADDITIONAL INFORMATION

- 9.1 **Appendix A - Exceptions to Terms and Conditions**
- 9.2 **Appendix B – Contract minimum requirements**
- 9.3 **Appendix C – Scope of Services**
- 9.4 **Appendix D – Regional Public Health Networks**
- 9.5 **Appendix E – CLAS Requirements**

EXCEPTIONS TO TERMS AND CONDITIONS

RESPONDERS ARE CAUTIONED THAT BY TAKING ANY EXCEPTION THEY MAY BE MATERIALLY DEVIATING FROM THE RFP SPECIFICATIONS. IF A RESPONDER MATERIALLY DEVIATES FROM A RFP SPECIFICATION, ITS PROPOSAL MAY BE REJECTED.

INSTRUCTIONS: Responders must explicitly list all exceptions to State of NH minimum terms and conditions. Reference the actual number of the State's term and condition and Exhibit number for which an exception(s) is being taken. If no exceptions exist, state "NONE" specifically on the form below. Whether or not exceptions are taken, the Responder must sign and date this form and submit it as part of their Proposal. *(Add additional pages if necessary.)*

Responder Name:	
<u>Term & Condition Number/Provision</u>	<u>Explanation of Exception</u>

Date _____

Notice: This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

AGREEMENT

The State of New Hampshire and the Contractor hereby mutually agree as follows:

GENERAL PROVISIONS

1. IDENTIFICATION.

1.1 State Agency Name		1.2 State Agency Address	
1.3 Contractor Name		1.4 Contractor Address	
1.5 Contractor Phone Number	1.6 Account Number	1.7 Completion Date	1.8 Price Limitation
1.9 Contracting Officer for State Agency		1.10 State Agency Telephone Number	
1.11 Contractor Signature		1.12 Name and Title of Contractor Signatory	
1.13 Acknowledgement: State of _____, County of _____ On _____, before the undersigned officer, personally appeared the person identified in block 1.12, or satisfactorily proven to be the person whose name is signed in block 1.11, and acknowledged that s/he executed this document in the capacity indicated in block 1.12.			
1.13.1 Signature of Notary Public or Justice of the Peace <div style="border: 1px solid black; width: 100px; height: 30px; margin: 0 auto;"></div> [Seal]			
1.13.2 Name and Title of Notary or Justice of the Peace			
1.14 State Agency Signature <div style="text-align: right;">Date: _____</div>		1.15 Name and Title of State Agency Signatory	
1.16 Approval by the N.H. Department of Administration, Division of Personnel (<i>if applicable</i>) <div style="display: flex; justify-content: space-between;"> By: _____ Director, On: _____ </div>			
1.17 Approval by the Attorney General (Form, Substance and Execution) (<i>if applicable</i>) <div style="display: flex; justify-content: space-between;"> By: _____ On: _____ </div>			
1.18 Approval by the Governor and Executive Council (<i>if applicable</i>) <div style="display: flex; justify-content: space-between;"> By: _____ On: _____ </div>			

2. EMPLOYMENT OF CONTRACTOR/SERVICES TO BE PERFORMED. The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT A which is incorporated herein by reference ("Services").

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.18, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.14 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

4. CONDITIONAL NATURE OF AGREEMENT.

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Contractor notice of such termination. The State shall not be required to transfer funds from any other account to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT B which is incorporated herein by reference.

5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.

6.1 In connection with the performance of the Services, the Contractor shall comply with all statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal opportunity laws. This may include the requirement to utilize auxiliary aids and services to ensure that persons with communication disabilities, including vision, hearing and speech, can communicate with, receive information from, and convey information to the Contractor. In addition, the Contractor shall comply with all applicable copyright laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3 If this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all the provisions of Executive Order No. 11246 ("Equal Employment Opportunity"), as supplemented by the regulations of the United States Department of Labor (41 C.F.R. Part 60), and with any rules, regulations and guidelines as the State of New Hampshire or the United States issue to implement these regulations. The Contractor further agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

7. PERSONNEL.

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this

Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

8. EVENT OF DEFAULT/REMEDIES.

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):

8.1.1 failure to perform the Services satisfactorily or on schedule;

8.1.2 failure to submit any report required hereunder; and/or

8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both.

9. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

9.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

9.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

9.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

10. TERMINATION. In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT A.

11. CONTRACTOR'S RELATION TO THE STATE. In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice and consent of the State. None of the Services shall be subcontracted by the Contractor without the prior written notice and consent of the State.

13. INDEMNIFICATION. The Contractor shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based or resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Contractor. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

14. INSURANCE.

14.1 The Contractor shall, at its sole expense, obtain and maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate ; and

14.1.2 special cause of loss coverage form covering all property subject to subparagraph 9.2 herein, in an amount not less than 80% of the whole replacement value of the property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

Appendix B

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than thirty (30) days prior to the expiration date of each of the insurance policies. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference. Each certificate(s) of insurance shall contain a clause requiring the insurer to provide the Contracting Officer identified in block 1.9, or his or her successor, no less than thirty (30) days prior written notice of cancellation or modification of the policy.

15. WORKERS' COMPENSATION.

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A (*"Workers' Compensation"*).

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

16. WAIVER OF BREACH. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

17. NOTICE. Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

18. AMENDMENT. This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no

such approval is required under the circumstances pursuant to State law, rule or policy.

19. CONSTRUCTION OF AGREEMENT AND TERMS.

This Agreement shall be construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.

20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

21. HEADINGS. The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

22. SPECIAL PROVISIONS. Additional provisions set forth in the attached EXHIBIT C are incorporated herein by reference.

23. SEVERABILITY. In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

24. ENTIRE AGREEMENT. This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire Agreement and understanding between the parties, and supersedes all prior Agreements and understandings relating hereto.



SPECIAL PROVISIONS

Contractors Obligations: The Contractor covenants and agrees that all funds received by the Contractor under the Contract shall be used only as payment to the Contractor for services provided to eligible individuals and, in the furtherance of the aforesaid covenants, the Contractor hereby covenants and agrees as follows:

1. **Compliance with Federal and State Laws:** If the Contractor is permitted to determine the eligibility of individuals such eligibility determination shall be made in accordance with applicable federal and state laws, regulations, orders, guidelines, policies and procedures.
2. **Time and Manner of Determination:** Eligibility determinations shall be made on forms provided by the Department for that purpose and shall be made and remade at such times as are prescribed by the Department.
3. **Documentation:** In addition to the determination forms required by the Department, the Contractor shall maintain a data file on each recipient of services hereunder, which file shall include all information necessary to support an eligibility determination and such other information as the Department requests. The Contractor shall furnish the Department with all forms and documentation regarding eligibility determinations that the Department may request or require.
4. **Fair Hearings:** The Contractor understands that all applicants for services hereunder, as well as individuals declared ineligible have a right to a fair hearing regarding that determination. The Contractor hereby covenants and agrees that all applicants for services shall be permitted to fill out an application form and that each applicant or re-applicant shall be informed of his/her right to a fair hearing in accordance with Department regulations.
5. **Gratuities or Kickbacks:** The Contractor agrees that it is a breach of this Contract to accept or make a payment, gratuity or offer of employment on behalf of the Contractor, any Sub-Contractor or the State in order to influence the performance of the Scope of Work detailed in Exhibit A of this Contract. The State may terminate this Contract and any sub-contract or sub-agreement if it is determined that payments, gratuities or offers of employment of any kind were offered or received by any officials, officers, employees or agents of the Contractor or Sub-Contractor.
6. **Retroactive Payments:** Notwithstanding anything to the contrary contained in the Contract or in any other document, contract or understanding, it is expressly understood and agreed by the parties hereto, that no payments will be made hereunder to reimburse the Contractor for costs incurred for any purpose or for any services provided to any individual prior to the Effective Date of the Contract and no payments shall be made for expenses incurred by the Contractor for any services provided prior to the date on which the individual applies for services or (except as otherwise provided by the federal regulations) prior to a determination that the individual is eligible for such services.
7. **Conditions of Purchase:** Notwithstanding anything to the contrary contained in the Contract, nothing herein contained shall be deemed to obligate or require the Department to purchase services hereunder at a rate which reimburses the Contractor in excess of the Contractors costs, at a rate which exceeds the amounts reasonable and necessary to assure the quality of such service, or at a rate which exceeds the rate charged by the Contractor to ineligible individuals or other third party funders for such service. If at any time during the term of this Contract or after receipt of the Final Expenditure Report hereunder, the Department shall determine that the Contractor has used payments hereunder to reimburse items of expense other than such costs, or has received payment in excess of such costs or in excess of such rates charged by the Contractor to ineligible individuals or other third party funders, the Department may elect to:
 - 7.1. Renegotiate the rates for payment hereunder, in which event new rates shall be established;
 - 7.2. Deduct from any future payment to the Contractor the amount of any prior reimbursement in excess of costs;



- 7.3. Demand repayment of the excess payment by the Contractor in which event failure to make such repayment shall constitute an Event of Default hereunder. When the Contractor is permitted to determine the eligibility of individuals for services, the Contractor agrees to reimburse the Department for all funds paid by the Department to the Contractor for services provided to any individual who is found by the Department to be ineligible for such services at any time during the period of retention of records established herein.

RECORDS: MAINTENANCE, RETENTION, AUDIT, DISCLOSURE AND CONFIDENTIALITY:

8. **Maintenance of Records:** In addition to the eligibility records specified above, the Contractor covenants and agrees to maintain the following records during the Contract Period:
- 8.1. Fiscal Records: books, records, documents and other data evidencing and reflecting all costs and other expenses incurred by the Contractor in the performance of the Contract, and all income received or collected by the Contractor during the Contract Period, said records to be maintained in accordance with accounting procedures and practices which sufficiently and properly reflect all such costs and expenses, and which are acceptable to the Department, and to include, without limitation, all ledgers, books, records, and original evidence of costs such as purchase requisitions and orders, vouchers, requisitions for materials, inventories, valuations of in-kind contributions, labor time cards, payrolls, and other records requested or required by the Department.
- 8.2. Statistical Records: Statistical, enrollment, attendance or visit records for each recipient of services during the Contract Period, which records shall include all records of application and eligibility (including all forms required to determine eligibility for each such recipient), records regarding the provision of services and all invoices submitted to the Department to obtain payment for such services.
- 8.3. Medical Records: Where appropriate and as prescribed by the Department regulations, the Contractor shall retain medical records on each patient/recipient of services.
9. **Audit:** Contractor shall submit an annual audit to the Department within 60 days after the close of the agency fiscal year. It is recommended that the report be prepared in accordance with the provision of Office of Management and Budget Circular A-133, "Audits of States, Local Governments, and Non Profit Organizations" and the provisions of Standards for Audit of Governmental Organizations, Programs, Activities and Functions, issued by the US General Accounting Office (GAO standards) as they pertain to financial compliance audits.
- 9.1. Audit and Review: During the term of this Contract and the period for retention hereunder, the Department, the United States Department of Health and Human Services, and any of their designated representatives shall have access to all reports and records maintained pursuant to the Contract for purposes of audit, examination, excerpts and transcripts.
- 9.2. Audit Liabilities: In addition to and not in any way in limitation of obligations of the Contract, it is understood and agreed by the Contractor that the Contractor shall be held liable for any state or federal audit exceptions and shall return to the Department, all payments made under the Contract to which exception has been taken or which have been disallowed because of such an exception.
10. **Confidentiality of Records:** All information, reports, and records maintained hereunder or collected in connection with the performance of the services and the Contract shall be confidential and shall not be disclosed by the Contractor, provided however, that pursuant to state laws and the regulations of the Department regarding the use and disclosure of such information, disclosure may be made to public officials requiring such information in connection with their official duties and for purposes directly connected to the administration of the services and the Contract; and provided further, that the use or disclosure by any party of any information concerning a recipient for any purpose not directly connected with the administration of the Department or the Contractor's responsibilities with respect to purchased services hereunder is prohibited except on written consent of the recipient, his attorney or guardian.



Notwithstanding anything to the contrary contained herein the covenants and conditions contained in the Paragraph shall survive the termination of the Contract for any reason whatsoever.

11. **Reports:** Fiscal and Statistical: The Contractor agrees to submit the following reports at the following times if requested by the Department.
 - 11.1. Interim Financial Reports: Written interim financial reports containing a detailed description of all costs and non-allowable expenses incurred by the Contractor to the date of the report and containing such other information as shall be deemed satisfactory by the Department to justify the rate of payment hereunder. Such Financial Reports shall be submitted on the form designated by the Department or deemed satisfactory by the Department.
 - 11.2. Final Report: A final report shall be submitted within thirty (30) days after the end of the term of this Contract. The Final Report shall be in a form satisfactory to the Department and shall contain a summary statement of progress toward goals and objectives stated in the Proposal and other information required by the Department.
12. **Completion of Services:** Disallowance of Costs: Upon the purchase by the Department of the maximum number of units provided for in the Contract and upon payment of the price limitation hereunder, the Contract and all the obligations of the parties hereunder (except such obligations as, by the terms of the Contract are to be performed after the end of the term of this Contract and/or survive the termination of the Contract) shall terminate, provided however, that if, upon review of the Final Expenditure Report the Department shall disallow any expenses claimed by the Contractor as costs hereunder the Department shall retain the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.
13. **Credits:** All documents, notices, press releases, research reports and other materials prepared during or resulting from the performance of the services of the Contract shall include the following statement:
 - 13.1. The preparation of this (report, document etc.) was financed under a Contract with the State of New Hampshire, Department of Health and Human Services, with funds provided in part by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services.
14. **Prior Approval and Copyright Ownership:** All materials (written, video, audio) produced or purchased under the contract shall have prior approval from DHHS before printing, production, distribution or use. The DHHS will retain copyright ownership for any and all original materials produced, including, but not limited to, brochures, resource directories, protocols or guidelines, posters, or reports. Contractor shall not reproduce any materials produced under the contract without prior written approval from DHHS.
15. **Operation of Facilities: Compliance with Laws and Regulations:** In the operation of any facilities for providing services, the Contractor shall comply with all laws, orders and regulations of federal, state, county and municipal authorities and with any direction of any Public Officer or officers pursuant to laws which shall impose an order or duty upon the contractor with respect to the operation of the facility or the provision of the services at such facility. If any governmental license or permit shall be required for the operation of the said facility or the performance of the said services, the Contractor will procure said license or permit, and will at all times comply with the terms and conditions of each such license or permit. In connection with the foregoing requirements, the Contractor hereby covenants and agrees that, during the term of this Contract the facilities shall comply with all rules, orders, regulations, and requirements of the State Office of the Fire Marshal and the local fire protection agency, and shall be in conformance with local building and zoning codes, by-laws and regulations.
16. **Equal Employment Opportunity Plan (EEOP):** The Contractor will provide an Equal Employment Opportunity Plan (EEOP) to the Office for Civil Rights, Office of Justice Programs (OCR), if it has received a single award of \$500,000 or more. If the recipient receives \$25,000 or more and has 50 or



more employees, it will maintain a current EEOP on file and submit an EEOP Certification Form to the OCR, certifying that its EEOP is on file. For recipients receiving less than \$25,000, or public grantees with fewer than 50 employees, regardless of the amount of the award, the recipient will provide an EEOP Certification Form to the OCR certifying it is not required to submit or maintain an EEOP. Non-profit organizations, Indian Tribes, and medical and educational institutions are exempt from the EEOP requirement, but are required to submit a certification form to the OCR to claim the exemption. EEOP Certification Forms are available at: <http://www.ojp.usdoj/about/ocr/pdfs/cert.pdf>.

17. **Limited English Proficiency (LEP):** As clarified by Executive Order 13166, Improving Access to Services for persons with Limited English Proficiency, and resulting agency guidance, national origin discrimination includes discrimination on the basis of limited English proficiency (LEP). To ensure compliance with the Omnibus Crime Control and Safe Streets Act of 1968 and Title VI of the Civil Rights Act of 1964, Contractors must take reasonable steps to ensure that LEP persons have meaningful access to its programs.
18. **Pilot Program for Enhancement of Contractor Employee Whistleblower Protections:** The following shall apply to all contracts that exceed the Simplified Acquisition Threshold as defined in 48 CFR 2.101 (currently, \$150,000)

CONTRACTOR EMPLOYEE WHISTLEBLOWER RIGHTS AND REQUIREMENT TO INFORM EMPLOYEES OF
WHISTLEBLOWER RIGHTS (SEP 2013)

(a) This contract and employees working on this contract will be subject to the whistleblower rights and remedies in the pilot program on Contractor employee whistleblower protections established at 41 U.S.C. 4712 by section 828 of the National Defense Authorization Act for Fiscal Year 2013 (Pub. L. 112-239) and FAR 3.908.

(b) The Contractor shall inform its employees in writing, in the predominant language of the workforce, of employee whistleblower rights and protections under 41 U.S.C. 4712, as described in section 3.908 of the Federal Acquisition Regulation.

(c) The Contractor shall insert the substance of this clause, including this paragraph (c), in all subcontracts over the simplified acquisition threshold.

19. **Subcontractors:** DHHS recognizes that the Contractor may choose to use subcontractors with greater expertise to perform certain health care services or functions for efficiency or convenience, but the Contractor shall retain the responsibility and accountability for the function(s). Prior to subcontracting, the Contractor shall evaluate the subcontractor's ability to perform the delegated function(s). This is accomplished through a written agreement that specifies activities and reporting responsibilities of the subcontractor and provides for revoking the delegation or imposing sanctions if the subcontractor's performance is not adequate. Subcontractors are subject to the same contractual conditions as the Contractor and the Contractor is responsible to ensure subcontractor compliance with those conditions.
- When the Contractor delegates a function to a subcontractor, the Contractor shall do the following:
- 19.1. Evaluate the prospective subcontractor's ability to perform the activities, before delegating the function
 - 19.2. Have a written agreement with the subcontractor that specifies activities and reporting responsibilities and how sanctions/revocation will be managed if the subcontractor's performance is not adequate
 - 19.3. Monitor the subcontractor's performance on an ongoing basis



- 19.4. Provide to DHHS an annual schedule identifying all subcontractors, delegated functions and responsibilities, and when the subcontractor's performance will be reviewed
- 19.5. DHHS shall, at its discretion, review and approve all subcontracts.

If the Contractor identifies deficiencies or areas for improvement are identified, the Contractor shall take corrective action.

DEFINITIONS

As used in the Contract, the following terms shall have the following meanings:

COSTS: Shall mean those direct and indirect items of expense determined by the Department to be allowable and reimbursable in accordance with cost and accounting principles established in accordance with state and federal laws, regulations, rules and orders.

DEPARTMENT: NH Department of Health and Human Services.

FINANCIAL MANAGEMENT GUIDELINES: Shall mean that section of the Contractor Manual which is entitled "Financial Management Guidelines" and which contains the regulations governing the financial activities of contractor agencies which have contracted with the State of NH to receive funds.

PROPOSAL: If applicable, shall mean the document submitted by the Contractor on a form or forms required by the Department and containing a description of the Services to be provided to eligible individuals by the Contractor in accordance with the terms and conditions of the Contract and setting forth the total cost and sources of revenue for each service to be provided under the Contract.

UNIT: For each service that the Contractor is to provide to eligible individuals hereunder, shall mean that period of time or that specified activity determined by the Department and specified in Exhibit B of the Contract.

FEDERAL/STATE LAW: Wherever federal or state laws, regulations, rules, orders, and policies, etc. are referred to in the Contract, the said reference shall be deemed to mean all such laws, regulations, etc. as they may be amended or revised from the time to time.

CONTRACTOR MANUAL: Shall mean that document prepared by the NH Department of Administrative Services containing a compilation of all regulations promulgated pursuant to the New Hampshire Administrative Procedures Act. NH RSA Ch 541-A, for the purpose of implementing State of NH and federal regulations promulgated thereunder.

SUPPLANTING OTHER FEDERAL FUNDS: The Contractor guarantees that funds provided under this Contract will not supplant any existing federal funds available for these services.



REVISIONS TO GENERAL PROVISIONS

1. Subparagraph 4 of the General Provisions of this contract, Conditional Nature of Agreement, is replaced as follows:
 4. **CONDITIONAL NATURE OF AGREEMENT.**
Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including without limitation, the continuance of payments, in whole or in part, under this Agreement are contingent upon continued appropriation or availability of funds, including any subsequent changes to the appropriation or availability of funds affected by any state or federal legislative or executive action that reduces, eliminates, or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope of Services provided in Exhibit A, Scope of Services, in whole or in part. In no event shall the State be liable for any payments hereunder in excess of appropriated or available funds. In the event of a reduction, termination or modification of appropriated or available funds, the State shall have the right to withhold payment until such funds become available, if ever. The State shall have the right to reduce, terminate or modify services under this Agreement immediately upon giving the Contractor notice of such reduction, termination or modification. The State shall not be required to transfer funds from any other source or account into the Account(s) identified in block 1.6 of the General Provisions, Account Number, or any other account, in the event funds are reduced or unavailable.
2. Subparagraph 10 of the General Provisions of this contract, Termination, is amended by adding the following language:
 - 10.1 The State may terminate the Agreement at any time for any reason, at the sole discretion of the State, 30 days after giving the Contractor written notice that the State is exercising its option to terminate the Agreement.
 - 10.2 In the event of early termination, the Contractor shall, within 15 days of notice of early termination, develop and submit to the State a Transition Plan for services under the Agreement, including but not limited to, identifying the present and future needs of clients receiving services under the Agreement and establishes a process to meet those needs.
 - 10.3 The Contractor shall fully cooperate with the State and shall promptly provide detailed information to support the Transition Plan including, but not limited to, any information or data requested by the State related to the termination of the Agreement and Transition Plan and shall provide ongoing communication and revisions of the Transition Plan to the State as requested.
 - 10.4 In the event that services under the Agreement, including but not limited to clients receiving services under the Agreement are transitioned to having services delivered by another entity including contracted providers or the State, the Contractor shall provide a process for uninterrupted delivery of services in the Transition Plan.
 - 10.5 The Contractor shall establish a method of notifying clients and other affected individuals about the transition. The Contractor shall include the proposed communications in its Transition Plan submitted to the State as described above.



CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

ALTERNATIVE I - FOR GRANTEES OTHER THAN INDIVIDUALS

**US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS**

This certification is required by the regulations implementing Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.). The January 31, 1989 regulations were amended and published as Part II of the May 25, 1990 Federal Register (pages 21681-21691), and require certification by grantees (and by inference, sub-grantees and sub-contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a grantee (and by inference, sub-grantees and sub-contractors) that is a State may elect to make one certification to the Department in each federal fiscal year in lieu of certificates for each grant during the federal fiscal year covered by the certification. The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment. Contractors using this form should send it to:

Commissioner
NH Department of Health and Human Services
129 Pleasant Street,
Concord, NH 03301-6505

1. The grantee certifies that it will or will continue to provide a drug-free workplace by:
 - 1.1. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
 - 1.2. Establishing an ongoing drug-free awareness program to inform employees about
 - 1.2.1. The dangers of drug abuse in the workplace;
 - 1.2.2. The grantee's policy of maintaining a drug-free workplace;
 - 1.2.3. Any available drug counseling, rehabilitation, and employee assistance programs; and
 - 1.2.4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
 - 1.3. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
 - 1.4. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will
 - 1.4.1. Abide by the terms of the statement; and
 - 1.4.2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
 - 1.5. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph 1.4.2 from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer on whose grant activity the convicted employee was working, unless the Federal agency

Appendix B
New Hampshire Department of Health and Human Services
Exhibit D



- has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- 1.6. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph 1.4.2, with respect to any employee who is so convicted
 - 1.6.1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 - 1.6.2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
 - 1.7. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs 1.1, 1.2, 1.3, 1.4, 1.5, and 1.6.
2. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant.

Place of Performance (street address, city, county, state, zip code) (list each location)

Check ☐ if there are workplaces on file that are not identified here.

Contractor Name:

Date

Name:
Title:



CERTIFICATION REGARDING LOBBYING

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Section 319 of Public Law 101-121, Government wide Guidance for New Restrictions on Lobbying, and 31 U.S.C. 1352, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

Programs (indicate applicable program covered):

- *Temporary Assistance to Needy Families under Title IV-A
- *Child Support Enforcement Program under Title IV-D
- *Social Services Block Grant Program under Title XX
- *Medicaid Program under Title XIX
- *Community Services Block Grant under Title VI
- *Child Care Development Block Grant under Title IV

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor).
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, attached and identified as Standard Exhibit E-I.)
3. The undersigned shall require that the language of this certification be included in the award document for sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Contractor Name: _____

Date

Name:
Title:



CERTIFICATION REGARDING DEBARMENT, SUSPENSION
AND OTHER RESPONSIBILITY MATTERS

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Executive Office of the President, Executive Order 12549 and 45 CFR Part 76 regarding Debarment, Suspension, and Other Responsibility Matters, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal (contract), the prospective primary participant is providing the certification set out below.
2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. If necessary, the prospective participant shall submit an explanation of why it cannot provide the certification. The certification or explanation will be considered in connection with the NH Department of Health and Human Services' (DHHS) determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
3. The certification in this clause is a material representation of fact upon which reliance was placed when DHHS determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, DHHS may terminate this transaction for cause or default.
4. The prospective primary participant shall provide immediate written notice to the DHHS agency to whom this proposal (contract) is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549: 45 CFR Part 76. See the attached definitions.
6. The prospective primary participant agrees by submitting this proposal (contract) that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by DHHS.
7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," provided by DHHS, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or involuntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List (of excluded parties).
9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and



information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal government, DHHS may terminate this transaction for cause or default.

PRIMARY COVERED TRANSACTIONS

11. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
- 11.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - 11.2. have not within a three-year period preceding this proposal (contract) been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or a contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - 11.3. are not presently indicted for otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (I)(b) of this certification; and
 - 11.4. have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
12. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal (contract).

LOWER TIER COVERED TRANSACTIONS

13. By signing and submitting this lower tier proposal (contract), the prospective lower tier participant, as defined in 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:
- 13.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
 - 13.2. where the prospective lower tier participant is unable to certify to any of the above, such prospective participant shall attach an explanation to this proposal (contract).
14. The prospective lower tier participant further agrees by submitting this proposal (contract) that it will include this clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions," without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

Contractor Name: _____

Date

Name:
Title:



**CERTIFICATION OF COMPLIANCE WITH REQUIREMENTS PERTAINING TO
FEDERAL NONDISCRIMINATION, EQUAL TREATMENT OF FAITH-BASED ORGANIZATIONS AND
WHISTLEBLOWER PROTECTIONS**

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

Contractor will comply, and will require any subgrantees or subcontractors to comply, with any applicable federal nondiscrimination requirements, which may include:

- the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. Section 3789d) which prohibits recipients of federal funding under this statute from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act requires certain recipients to produce an Equal Employment Opportunity Plan;
- the Juvenile Justice Delinquency Prevention Act of 2002 (42 U.S.C. Section 5672(b)) which adopts by reference, the civil rights obligations of the Safe Streets Act. Recipients of federal funding under this statute are prohibited from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act includes Equal Employment Opportunity Plan requirements;
- the Civil Rights Act of 1964 (42 U.S.C. Section 2000d, which prohibits recipients of federal financial assistance from discriminating on the basis of race, color, or national origin in any program or activity);
- the Rehabilitation Act of 1973 (29 U.S.C. Section 794), which prohibits recipients of Federal financial assistance from discriminating on the basis of disability, in regard to employment and the delivery of services or benefits, in any program or activity;
- the Americans with Disabilities Act of 1990 (42 U.S.C. Sections 12131-34), which prohibits discrimination and ensures equal opportunity for persons with disabilities in employment, State and local government services, public accommodations, commercial facilities, and transportation;
- the Education Amendments of 1972 (20 U.S.C. Sections 1681, 1683, 1685-86), which prohibits discrimination on the basis of sex in federally assisted education programs;
- the Age Discrimination Act of 1975 (42 U.S.C. Sections 6106-07), which prohibits discrimination on the basis of age in programs or activities receiving Federal financial assistance. It does not include employment discrimination;
- 28 C.F.R. pt. 31 (U.S. Department of Justice Regulations – OJJDP Grant Programs); 28 C.F.R. pt. 42 (U.S. Department of Justice Regulations – Nondiscrimination; Equal Employment Opportunity; Policies and Procedures); Executive Order No. 13279 (equal protection of the laws for faith-based and community organizations); Executive Order No. 13559, which provide fundamental principles and policy-making criteria for partnerships with faith-based and neighborhood organizations;
- 28 C.F.R. pt. 38 (U.S. Department of Justice Regulations – Equal Treatment for Faith-Based Organizations); and Whistleblower protections 41 U.S.C. §4712 and The National Defense Authorization Act (NDAA) for Fiscal Year 2013 (Pub. L. 112-239, enacted January 2, 2013) the Pilot Program for Enhancement of Contract Employee Whistleblower Protections, which protects employees against reprisal for certain whistle blowing activities in connection with federal grants and contracts.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment.

Exhibit G

Contractor Initials _____

Certification of Compliance with requirements pertaining to Federal Nondiscrimination, Equal Treatment of Faith-Based Organizations
and Whistleblower protections

Appendix B
New Hampshire Department of Health and Human Services
Exhibit G



In the event a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, or sex against a recipient of funds, the recipient will forward a copy of the finding to the Office for Civil Rights, to the applicable contracting agency or division within the Department of Health and Human Services, and to the Department of Health and Human Services Office of the Ombudsman.

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this proposal (contract) the Contractor agrees to comply with the provisions indicated above.

Contractor Name: _____

Date

Name:
Title:

Exhibit G

Contractor Initials _____

Certification of Compliance with requirements pertaining to Federal Nondiscrimination, Equal Treatment of Faith-Based Organizations
and Whistleblower protections



CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, Part C - Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1000 per day and/or the imposition of an administrative compliance order on the responsible entity.

The Contractor identified in Section 1.3 of the General Provisions agrees, by signature of the Contractor's representative as identified in Section 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this contract, the Contractor agrees to make reasonable efforts to comply with all applicable provisions of Public Law 103-227, Part C, known as the Pro-Children Act of 1994.

Contractor Name:

Date

Name:
Title:



Exhibit I

HEALTH INSURANCE PORTABILITY ACT
BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement agrees to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191 and with the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160 and 164 applicable to business associates. As defined herein, "Business Associate" shall mean the Contractor and subcontractors and agents of the Contractor that receive, use or have access to protected health information under this Agreement and "Covered Entity" shall mean the State of New Hampshire, Department of Health and Human Services.

(1) Definitions.

- a. "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.
- b. "Business Associate" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.
- c. "Covered Entity" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.
- d. "Designated Record Set" shall have the same meaning as the term "designated record set" in 45 CFR Section 164.501.
- e. "Data Aggregation" shall have the same meaning as the term "data aggregation" in 45 CFR Section 164.501.
- f. "Health Care Operations" shall have the same meaning as the term "health care operations" in 45 CFR Section 164.501.
- g. "HITECH Act" means the Health Information Technology for Economic and Clinical Health Act, Title XIII, Subtitle D, Part 1 & 2 of the American Recovery and Reinvestment Act of 2009.
- h. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162 and 164 and amendments thereto.
- i. "Individual" shall have the same meaning as the term "individual" in 45 CFR Section 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR Section 164.501(g).
- j. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 CFR Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.
- k. "Protected Health Information" shall have the same meaning as the term "protected health information" in 45 CFR Section 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.



Exhibit I

- I. "Required by Law" shall have the same meaning as the term "required by law" in 45 CFR Section 164.103.
- m. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his/her designee.
- n. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 CFR Part 164, Subpart C, and amendments thereto.
- o. "Unsecured Protected Health Information" means protected health information that is not secured by a technology standard that renders protected health information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.
- p. Other Definitions - All terms not otherwise defined herein shall have the meaning established under 45 C.F.R. Parts 160, 162 and 164, as amended from time to time, and the HITECH Act.

(2) **Business Associate Use and Disclosure of Protected Health Information.**

- a. Business Associate shall not use, disclose, maintain or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under Exhibit A of the Agreement. Further, Business Associate, including but not limited to all its directors, officers, employees and agents, shall not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.
- b. Business Associate may use or disclose PHI:
 - I. For the proper management and administration of the Business Associate;
 - II. As required by law, pursuant to the terms set forth in paragraph d. below; or
 - III. For data aggregation purposes for the health care operations of Covered Entity.
- c. To the extent Business Associate is permitted under the Agreement to disclose PHI to a third party, Business Associate must obtain, prior to making any such disclosure, (i) reasonable assurances from the third party that such PHI will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the third party; and (ii) an agreement from such third party to notify Business Associate, in accordance with the HIPAA Privacy, Security, and Breach Notification Rules of any breaches of the confidentiality of the PHI, to the extent it has obtained knowledge of such breach.
- d. The Business Associate shall not, unless such disclosure is reasonably necessary to provide services under Exhibit A of the Agreement, disclose any PHI in response to a request for disclosure on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity has an opportunity to object to the disclosure and to seek appropriate relief. If Covered Entity objects to such disclosure, the Business



Exhibit I

Associate shall refrain from disclosing the PHI until Covered Entity has exhausted all remedies.

- e. If the Covered Entity notifies the Business Associate that Covered Entity has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Business Associate shall be bound by such additional restrictions and shall not disclose PHI in violation of such additional restrictions and shall abide by any additional security safeguards.

(3) Obligations and Activities of Business Associate.

- a. The Business Associate shall notify the Covered Entity's Privacy Officer immediately after the Business Associate becomes aware of any use or disclosure of protected health information not provided for by the Agreement including breaches of unsecured protected health information and/or any security incident that may have an impact on the protected health information of the Covered Entity.
- b. The Business Associate shall immediately perform a risk assessment when it becomes aware of any of the above situations. The risk assessment shall include, but not be limited to:
- o The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;
 - o The unauthorized person used the protected health information or to whom the disclosure was made;
 - o Whether the protected health information was actually acquired or viewed
 - o The extent to which the risk to the protected health information has been mitigated.

The Business Associate shall complete the risk assessment within 48 hours of the breach and immediately report the findings of the risk assessment in writing to the Covered Entity.

- c. The Business Associate shall comply with all sections of the Privacy, Security, and Breach Notification Rule.
- d. Business Associate shall make available all of its internal policies and procedures, books and records relating to the use and disclosure of PHI received from, or created or received by the Business Associate on behalf of Covered Entity to the Secretary for purposes of determining Covered Entity's compliance with HIPAA and the Privacy and Security Rule.
- e. Business Associate shall require all of its business associates that receive, use or have access to PHI under the Agreement, to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein, including the duty to return or destroy the PHI as provided under Section 3 (I). The Covered Entity shall be considered a direct third party beneficiary of the Contractor's business associate agreements with Contractor's intended business associates, who will be receiving PHI



Exhibit I

- pursuant to this Agreement, with rights of enforcement and indemnification from such business associates who shall be governed by standard Paragraph #13 of the standard contract provisions (P-37) of this Agreement for the purpose of use and disclosure of protected health information.
- f. Within five (5) business days of receipt of a written request from Covered Entity, Business Associate shall make available during normal business hours at its offices all records, books, agreements, policies and procedures relating to the use and disclosure of PHI to the Covered Entity, for purposes of enabling Covered Entity to determine Business Associate's compliance with the terms of the Agreement.
 - g. Within ten (10) business days of receiving a written request from Covered Entity, Business Associate shall provide access to PHI in a Designated Record Set to the Covered Entity, or as directed by Covered Entity, to an individual in order to meet the requirements under 45 CFR Section 164.524.
 - h. Within ten (10) business days of receiving a written request from Covered Entity for an amendment of PHI or a record about an individual contained in a Designated Record Set, the Business Associate shall make such PHI available to Covered Entity for amendment and incorporate any such amendment to enable Covered Entity to fulfill its obligations under 45 CFR Section 164.526.
 - i. Business Associate shall document such disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR Section 164.528.
 - j. Within ten (10) business days of receiving a written request from Covered Entity for a request for an accounting of disclosures of PHI, Business Associate shall make available to Covered Entity such information as Covered Entity may require to fulfill its obligations to provide an accounting of disclosures with respect to PHI in accordance with 45 CFR Section 164.528.
 - k. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within two (2) business days forward such request to Covered Entity. Covered Entity shall have the responsibility of responding to forwarded requests. However, if forwarding the individual's request to Covered Entity would cause Covered Entity or the Business Associate to violate HIPAA and the Privacy and Security Rule, the Business Associate shall instead respond to the individual's request as required by such law and notify Covered Entity of such response as soon as practicable.
 - l. Within ten (10) business days of termination of the Agreement, for any reason, the Business Associate shall return or destroy, as specified by Covered Entity, all PHI received from, or created or received by the Business Associate in connection with the Agreement, and shall not retain any copies or back-up tapes of such PHI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, Business Associate shall continue to extend the protections of the Agreement, to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business



Exhibit I

Associate maintains such PHI. If Covered Entity, in its sole discretion, requires that the Business Associate destroy any or all PHI, the Business Associate shall certify to Covered Entity that the PHI has been destroyed.

(4) Obligations of Covered Entity

- a. Covered Entity shall notify Business Associate of any changes or limitation(s) in its Notice of Privacy Practices provided to individuals in accordance with 45 CFR Section 164.520, to the extent that such change or limitation may affect Business Associate's use or disclosure of PHI.
- b. Covered Entity shall promptly notify Business Associate of any changes in, or revocation of permission provided to Covered Entity by individuals whose PHI may be used or disclosed by Business Associate under this Agreement, pursuant to 45 CFR Section 164.506 or 45 CFR Section 164.508.
- c. Covered entity shall promptly notify Business Associate of any restrictions on the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 CFR 164.522, to the extent that such restriction may affect Business Associate's use or disclosure of PHI.

(5) Termination for Cause

In addition to Paragraph 10 of the standard terms and conditions (P-37) of this Agreement the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a breach by Business Associate of the Business Associate Agreement set forth herein as Exhibit I. The Covered Entity may either immediately terminate the Agreement or provide an opportunity for Business Associate to cure the alleged breach within a timeframe specified by Covered Entity. If Covered Entity determines that neither termination nor cure is feasible, Covered Entity shall report the violation to the Secretary.

(6) Miscellaneous

- a. Definitions and Regulatory References. All terms used, but not otherwise defined herein, shall have the same meaning as those terms in the Privacy and Security Rule, amended from time to time. A reference in the Agreement, as amended to include this Exhibit I, to a Section in the Privacy and Security Rule means the Section as in effect or as amended.
- b. Amendment. Covered Entity and Business Associate agree to take such action as is necessary to amend the Agreement, from time to time as is necessary for Covered Entity to comply with the changes in the requirements of HIPAA, the Privacy and Security Rule, and applicable federal and state law.
- c. Data Ownership. The Business Associate acknowledges that it has no ownership rights with respect to the PHI provided by or created on behalf of Covered Entity.
- d. Interpretation. The parties agree that any ambiguity in the Agreement shall be resolved to permit Covered Entity to comply with HIPAA, the Privacy and Security Rule.



Exhibit I

- e. Segregation. If any term or condition of this Exhibit I or the application thereof to any person(s) or circumstance is held invalid, such invalidity shall not affect other terms or conditions which can be given effect without the invalid term or condition; to this end the terms and conditions of this Exhibit I are declared severable.
- f. Survival. Provisions in this Exhibit I regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the Agreement in section (3) I, the defense and indemnification provisions of section (3) e and Paragraph 13 of the standard terms and conditions (P-37), shall survive the termination of the Agreement.

IN WITNESS WHEREOF, the parties hereto have duly executed this Exhibit I.

The State

Name of the Contractor

Signature of Authorized Representative

Signature of Authorized Representative

Name of Authorized Representative

Name of Authorized Representative

Title of Authorized Representative

Title of Authorized Representative

Date

Date



**CERTIFICATION REGARDING THE FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY
ACT (FFATA) COMPLIANCE**

The Federal Funding Accountability and Transparency Act (FFATA) requires prime awardees of individual Federal grants equal to or greater than \$25,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of \$25,000 or more. If the initial award is below \$25,000 but subsequent grant modifications result in a total award equal to or over \$25,000, the award is subject to the FFATA reporting requirements, as of the date of the award.

In accordance with 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), the Department of Health and Human Services (DHHS) must report the following information for any subaward or contract award subject to the FFATA reporting requirements:

1. Name of entity
2. Amount of award
3. Funding agency
4. NAICS code for contracts / CFDA program number for grants
5. Program source
6. Award title descriptive of the purpose of the funding action
7. Location of the entity
8. Principle place of performance
9. Unique identifier of the entity (DUNS #)
10. Total compensation and names of the top five executives if:
 - 10.1. More than 80% of annual gross revenues are from the Federal government, and those revenues are greater than \$25M annually and
 - 10.2. Compensation information is not already available through reporting to the SEC.

Prime grant recipients must submit FFATA required data by the end of the month, plus 30 days, in which the award or award amendment is made.

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of The Federal Funding Accountability and Transparency Act, Public Law 109-282 and Public Law 110-252, and 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

The below named Contractor agrees to provide needed information as outlined above to the NH Department of Health and Human Services and to comply with all applicable provisions of the Federal Financial Accountability and Transparency Act.

Contractor Name: _____

Date

Name:
Title:



FORM A

As the Contractor identified in Section 1.3 of the General Provisions, I certify that the responses to the below listed questions are true and accurate.

1. The DUNS number for your entity is: _____
2. In your business or organization's preceding completed fiscal year, did your business or organization receive (1) 80 percent or more of your annual gross revenue in U.S. federal contracts, subcontracts, loans, grants, sub-grants, and/or cooperative agreements; and (2) \$25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

_____ NO _____ YES

If the answer to #2 above is NO, stop here

If the answer to #2 above is YES, please answer the following:

3. Does the public have access to information about the compensation of the executives in your business or organization through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C.78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

_____ NO _____ YES

If the answer to #3 above is YES, stop here

If the answer to #3 above is NO, please answer the following:

4. The names and compensation of the five most highly compensated officers in your business or organization are as follows:

Name: _____	Amount: _____
Name: _____	Amount: _____
Name: _____	Amount: _____
Name: _____	Amount: _____
Name: _____	Amount: _____



Appendix C

Scope of Services

1. Provisions Applicable to All Services

- 1.1. The Contractor will submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. For the purposes of this contract, any reference to days shall mean calendar days.

2. Scope of Services

- 2.1. The Contractor shall complete an accreditation readiness scan of all known Recovery Community Organizations (RCOs), statewide. The Contractor shall:
 - 2.1.1. Determine each RCO's ability to achieve Council of Accreditation of Peer Recovery Support Services (CAPRSS) accreditation.
 - 2.1.2. Determine each RCO's ability to open a Recovery Center.
 - 2.1.3. Determine each RCO's capacity to provide Peer Recovery Support Services.
 - 2.1.4. Determine each RCO's commitment to becoming a Medicaid provider, upon approval from the Center for Medicaid and Medicare Services (CMS) of the establishment of a 'Recovery Community Organization' provider type under the New Hampshire Medicaid program.
 - 2.1.5. Provide a written determination of RCO readiness to the Department within 5 business days of completing the final RCO readiness scan.
- 2.2. The Contractor shall enter into contract with a minimum of five (5) Recovery Community Organizations (RCOs) in five (5) different Public Health Regions (See Appendix D – Regional Public Health Networks), as approved by the Department, in order to increase capacity for Peer Recovery Support Services (PRSS) within each of the selected five (5) Recovery Community Organizations. The Contractor shall:
 - 2.2.1. Ensure each Recovery Community Organization (RCO) represents a different Public Health Region (See Appendix D – Regional Public Health Network).
 - 2.2.2. Provide a copy of each executed RCO contract to the Department within five (5) days of contract execution.
- 2.3. The Contractor shall collaborate with Peer Recovery Support Services (PRSS) technical assistance assets, to assess each RCO for accreditation readiness in



Appendix C

-
- accordance with the standards set forth by the Council of Accreditation of Peer Recovery Support Services (CAPRSS). The Contractor shall:
- 2.3.1. Complete a written assessment of each RCO that indicates the RCO's capacity to provide PRSS services and current operational standards.
 - 2.3.2. Develop a written plan with each RCO that includes, but is not limited to:
 - 2.3.2.1. Timeframes to meeting CAPRSS accreditation standards.
 - 2.3.2.2. Goals that must be attained by each RCO in order to meet CAPRSS accreditation standards.
 - 2.3.2.3. Technical assistance needed for each RCO in order to meet CAPRSS goals, time frame and technical assistance accreditation requirements.
 - 2.3.3. Ensure training and technical assistance identified in Section 2.3.2.3 is provided to each RCO, as needed.
 - 2.4. The Contractor shall collaborate with the Council on Accreditation of Peer Recovery Support Services (CAPRSS) to provide assistance to each RCO to ensure each of the five (5) RCOs meet accreditation standards set forth by CAPRSS. The Contractor shall ensure assistance includes, but is not limited to:
 - 2.4.1. Personnel with the expertise necessary to deliver high quality training.
 - 2.4.2. Technical assistance, as needed.
 - 2.4.3. Organizational coaching.
 - 2.4.4. Capacity development consultation.
 - 2.4.5. Administrative support functions, as needed.
 - 2.5. The Contractor shall collaborate with the Center for Excellence to develop and provide training as well as technical assistance to RCOs in order to:
 - 2.5.1. Assist RCOs to attain accreditation.
 - 2.5.2. Provide technical assistance to RCOs to enroll in Medicaid upon the establishment of a "Peer Recovery Program" provider type by the New Hampshire Medicaid Program based on Federal Center for Medicaid and Medicare Services (CMS) and other Federal and State requirements, which include:
 - 2.5.2.1. 42 CFR, Subpart B (<http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=&SID=2a147022bd0e989f2eff02f0ba401830&mc=true&n=pt42.4.455&r=PART&ty=HTML#sp42.4.455.b>).
 - 2.5.2.2. 42 CFR, Subpart E (<http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=&SID=2a147022bd0e989f2eff02f0ba401830&mc=true&n=sp42.4.455.e&r=SUBPART&ty=HTML>).
 - 2.5.2.3. 45 CFR, 164.512(d) (http://www.ecfr.gov/cgi-bin/text-idx?SID=07d0a507d28ee03b2b09dfd7a2be33d2&mc=true&node=se45.1.164_1512&rqn=div8)..



Appendix C

-
- 2.5.3. Ensure personnel providing Peer Recovery Support services (PRSS) in RCOs are Certified Recovery Support Workers (CRSW) and meet the CAPRSS recovery coaching standards.
 - 2.5.4. Assist RCOs to expand capacity to include Peer Recovery Coaching and Telephone Recovery Support Services.
 - 2.5.5. Assist RCOs with expanding capacity to include back office support functions.
 - 2.5.6. Assist RCOs in establishing and a plan to sustain Recovery Center.
 - 2.6. The Contractor shall utilize logistical support provided by the Center for Excellence to facilitate a Community of Practice that allows RCO administrators and leaders to establish and strengthen collegiality, cooperation, collaboration and informal mentoring among RCOs. The Contractor shall:
 - 2.6.1. Organize regular on-going RCO regional meetings with RCO administrators and leaders.
 - 2.6.2. Ensure meetings are widely advertised to all RCOs, statewide.
 - 2.6.3. Ensure that each subcontracted RCO engages in its local Regional Public Health Network (RPHN) to participate in continuum of care development work.
 - 2.7. The Contractor shall assess the ability of each RCO to open and sustain a Recovery Center. The Contractor shall:
 - 2.7.1. Complete a written assessment of each RCO that indicates each RCO's readiness to open and sustain a Recovery Center, that includes, but is not limited to:
 - 2.7.1.1. The current organizational structure of the RCO's Recovery Center or the RCO's readiness to open a Recovery Center, as appropriate.
 - 2.7.1.2. The number of people that can be served by the RCO's Recovery Center.
 - 2.7.1.3. The RCOs financial viability to support a Recovery Center.
 - 2.7.2. Work with each RCO to develop a written plan to open a Recovery Center.
 - 2.7.3. Ensure training and technical assistance is available to Recovery Center staff, which may include but is not limited to:
 - 2.7.3.1. Customer service training.
 - 2.7.3.2. Peer Recovery Coaching Services.
 - 2.7.3.3. Telephone Recovery Support Services.
 - 2.7.4. Assist RCOs to secure funding from other public and private sources to ensure ongoing sustainability of services.
 - 2.8. The Contractor shall assist RCOs with performing back office functions that may include, but are not limited to:



Appendix C

-
- 2.8.1. Human resource functions.
 - 2.8.2. Financial functions such as accounting, bookkeeping and payroll.
 - 2.8.3. Billing functions.
 - 2.9. The Contractor shall ensure billing services are available to each RCO until such time RCOs can perform billing functions on their own. Billing functions shall include, but are not limited to:
 - 2.9.1. Accepting RCO invoices for PRSS services provided to clients.
 - 2.9.2. Submitting invoices to the Department for client services that are provided by the RCO and covered by funds in this grant for reimbursement.
 - 2.9.3. Submitting PRSS client services covered by Medicaid to the appropriate managed care organization (MCO).
 - 2.9.4. Disbursing payments received from MCOs to the appropriate RCO.
 - 2.9.5. Accepting RCO invoices for operational costs.
 - 2.9.6. Paying RCOs for operational costs on a cost reimbursement basis.
 - 2.9.7. Submitting RCO operational cost invoices to the Department for reimbursement.
 - 2.10. The Contractor shall collaborate with the NH Center for Excellence to:
 - 2.10.1. Identify data evaluation criteria.
 - 2.10.2. Implement an evaluation process in each RCO.
 - 2.11. The Contractor shall ensure technical assistance is available to each RCO in order to collect, analyze and utilize data, for the evaluation process in Section 2.10.2., which shall include but is not limited to:
 - 2.11.1. Demographics, which include but are not limited to:
 - 2.11.1.1. Gender
 - 2.11.1.2. Age
 - 2.11.1.3. Ethnicity
 - 2.11.2. Primary drug of choice
 - 2.11.3. SAMHSA National Outcome Measures
(http://www.dasis.samhsa.gov/dasis2/noms/noms_attach1.pdf)
 - 2.11.3.1. Abstinence
 - 2.11.3.2. Crime and Criminal Justice
 - 2.11.3.3. Employment/Education
 - 2.11.3.4. Stability in Housing
 - 2.11.3.5. Social Connectedness
 - 2.11.4. Referral Source
 - 2.11.5. Client Financial Information



Appendix C

-
- 2.11.6. Healthcare Coverage Information
 - 2.11.7. Substance Use Disorder treatment history
 - 2.11.8. Substance Use Disorder or Co-occurring Disorder recovery needs
 - 2.11.9. Participation in Community Services
 - 2.11.10. Recovery capital
 - 2.12. The Contractor will work with the Department to identify a second cohort of RCOs to prepare them for CAPRSS accreditation.

3. Reporting Requirements

- 3.1. Report on readiness for all considered RCO, that includes but is not limited to:
 - 3.1.1. Accreditation readiness.
 - 3.1.2. Recovery center capacity
 - 3.1.3. Capacity to provider PRSS
 - 3.1.4. Commitment to enrolling in Medicaid, upon approval from the Center for Medicaid and Medicare Services (CMS) of the establishment of a 'Recovery Community Organization' provider type under the New Hampshire Medicaid program.
- 3.2. The Contractor shall provide quarterly reports that include but are not limited to:
 - 3.2.1. Progress on each RCO's work plan components.
 - 3.2.2. Information on RCO trainings conducted, including but not limited to, type of training provided and number of attendees.
 - 3.2.3. Information regarding RCO meetings that occurred, as described in Section 2.6, including but not limited to, venue, number of attendees and methods used to advertise meetings.
 - 3.2.4. Back office support provided, as described in Section 2.8.
- 3.3. The Contractor shall submit a final report to the Department that includes, but is not limited to:
 - 3.3.1. Information on each of the five (5) RCOs including the number of individuals served by prior to subcontracting with the vendor verses the number served by the RCO in June of 2017.
 - 3.3.2. How many and what type of trainings were provided over the term of the contract.
 - 3.3.3. The number of RCOs that are accredited by the CAPRSS.
 - 3.3.4. The number and location of each Recovery Center that opened as a result of contracted services.
 - 3.3.5. The type of PRSS services delivered by each RCO.
 - 3.3.6. Information regarding clients served, which shall include but not be limited to:
 - 3.3.6.1. Analysis of client data by individual RCO.



Appendix C

-
- 3.3.6.2. Analysis of aggregated client data
 - 3.3.7. Back Office functions performed for each RCOs, which may include but is not limited to:
 - 3.3.7.1. Human Resources.
 - 3.3.7.2. Financial.
 - 3.3.7.3. Client billing to other funding sources not in this contract.
 - 3.3.8. All contractor work that has started and any progress toward CAPRSS accreditation for the second cohort of RCOs identified to the Department.

4. Deliverables

- 4.1. The Contractor shall provide copies of the executed contracts described in Section 2.2, to the Department within five (5) business days of fully executing the documents.
- 4.2. The Contractor shall complete an assessment, as described in Section 2.3.1, for each of the RCOs – for a minimum of five (5) assessments.
- 4.3. The Contractor shall provide a copy of each accreditation plan described in Section 2.3.2.
- 4.4. The Contractor shall provide a written Recovery Center assessment, as described in Section 2.7, for each RCO.
- 4.5. The Contractor shall provide the billing process and payment timeframes for providing the services in Section 2.8.

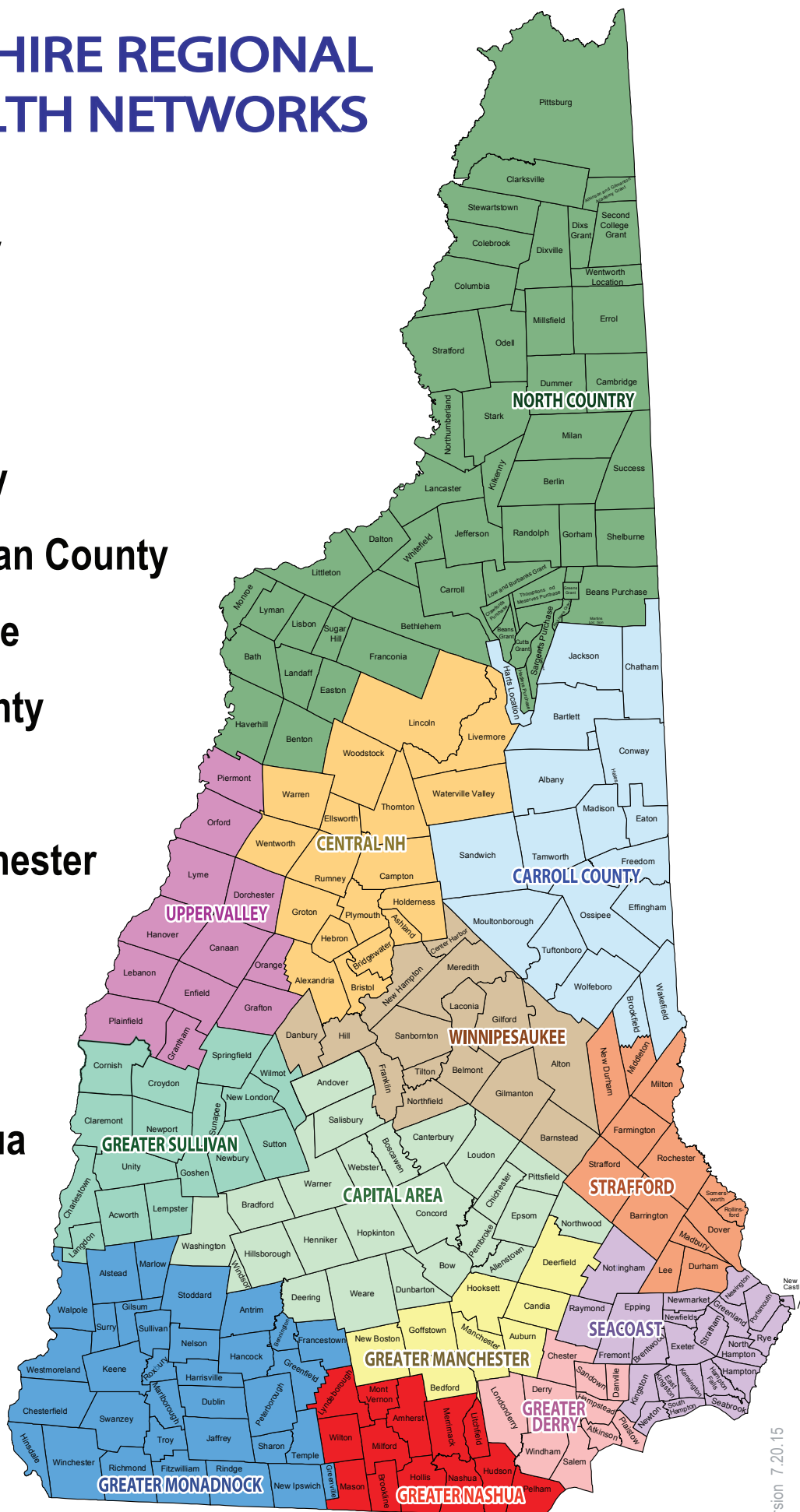
Appendix D - Regional Public Health Networks

TOWN LIST

REGION NAME	TOWN
North County	Atkinson and Gilmanton Academy Grant, Bath, Beans Grant, Beans Purchase, Benton, Berlin, Bethlehem, Cambridge, Carroll, Chandlers Purchase, Clarksville, Colebrook, Columbia, Crawfords Purchase, Cutts Grant, Dalton, Dixs Grant, Dixville, Dummer, Easton, Errol, Ervings Location, Franconia, Gorham, Greens Grant, Hadleys Purchase, Haverhill, Jefferson, Kilkenney, Lancaster, Landaff, Lisbon, Littleton, Low and Burbank's Grant, Lyman, Martins Location, Milan, Millsfield, Monroe, Northumberland, Odell, Pinkham's Grant, Pittsburg, Randolph, Sargents Purchase, Second College Grant, Shelburne, Stark, Stewartstown, Stratford, Success, Sugar Hill, Thompsons & Meserves Purchase, Wentworths Location, Whitefield
Upper Valley	Canaan, Dorchester, Enfield, Grafton, Grantham, Hanover, Lebanon, Lyme, Orange, Orford, Piermont, Plainfield
Central NH	Alexandria, Ashland, Bridgewater, Bristol, Campton, Ellsworth, Groton, Hebron, Holderness, Lincoln, Livermore, Plymouth, Rumney, Thornton, Warren, Waterville Valley, Wentworth, Woodstock
Carroll County	Albany, Bartlett, Brookfield, Chatham, Conway, Eaton, Effingham, Freedom, Hale's Location, Harts Location, Jackson, Madison, Moultonborough, Ossipee, Sandwich, Tamworth, Tuftonboro, Wakefield, Wolfeboro
Greater Sullivan	Acworth, Charlestown, Claremont, Cornish, Croydon, Goshen, Langdon, Lempster, Newbury, New London, Newport, Springfield, Sunapee, Sutton, Unity, Wilmot
Winnepesaukee	Alton, Barnstead, Belmont, Center Harbor, Danbury, Franklin, Gilford, Gilmanton, Hill, Laconia, Meredith, New Hampton, Northfield, Sanbornton, Tilton
Greater Monadnock	Alstead, Antrim, Bennington, Chesterfield, Dublin, Fitzwilliam, Francestown, Gilsum, Greenfield, Greenville, Hancock, Harrisville, Hinsdale, Jaffrey, Keene, Marlborough, Marlow, Nelson, New Ipswich, Peterborough, Richmond, Rindge, Roxbury, Sharon, Stoddard, Sullivan, Surry, Swanzey, Temple, Troy, Walpole, Westmoreland, Winchester
Capital	Allenstown, Andover, Boscawen, Bow, Bradford, Canterbury, Chichester, Concord, Deering, Dunbarton, Epsom, Henniker, Hillsborough, Hopkinton, Loudon, Northwood, Pembroke, Pittsfield, Salisbury, Warner, Washington, Weare, Webster, Windsor
Strafford County	Barrington, Dover, Durham, Farmington, Lee, Madbury, Middleton, Milton, New Durham, Rochester, Rollinsford, Somersworth, Strafford
Greater Manchester	Auburn, Bedford, Candia, Deerfield, Goffstown, Hooksett, Manchester, New Boston
Greater Nashua	Amherst, Brookline, Hollis, Hudson, Litchfield, Lyndeborough, Mason, Merrimack, Milford, Mont Vernon, Nashua, Pelham, Wilton
Greater Derry	Atkinson, Chester, Danville, Derry, Hampstead, Londonderry, Plaistow, Salem, Sandown, Windham
Seacoast	Brentwood, East Kingston, Epping, Exeter, Fremont, Greenland, Hampton, Hampton Falls, Kensington, Kingston, New Castle, Newfields, Newington, Newmarket, Newton, North Hampton, Nottingham, Portsmouth, Raymond, Rye, Seabrook, South Hampton, Stratham

NEW HAMPSHIRE REGIONAL PUBLIC HEALTH NETWORKS

- North Country
- Upper Valley
- Central NH
- Carroll County
- Greater Sullivan County
- Winnepesaukee
- Strafford County
- Capital Area
- Greater Manchester
- Seacoast
- Greater Monadnock
- Greater Nashua
- Greater Derry



THESE REGIONS ARE USED FOR PUBLIC HEALTH PLANNING AND THE DELIVERY OF SELECT PUBLIC HEALTH SERVICES.

APPENDIX E

Addendum to CLAS Section of RFP for Purpose of Documenting Title VI Compliance

All DHHS bidders are required to complete the following two (2) steps as part of their proposal:

- (1) Perform an individualized organizational assessment, using the four-factor analysis, to determine the extent of language assistance to provide for programs, services and/or activities; and;
- (2) Taking into account the outcome of the four-factor analysis, respond to the questions below.

Background:

Title VI of the Civil Rights Act of 1964 and its implementing regulations provide that no person shall be subjected to discrimination on the basis of race, color, or national origin under any program that receives Federal financial assistance. The courts have held that national origin discrimination includes discrimination on the basis of limited English proficiency. Any organization or individual that receives Federal financial assistance, through either a grant, contract, or subcontract is a covered entity under Title VI. Examples of covered entities include the NH Department of Health and Human Services and its contractors.

Covered entities are required to take reasonable steps to ensure *meaningful access* by persons with limited English proficiency (LEP) to their programs and activities. LEP persons are those with a limited ability to speak, read, write or understand English.

The **key** to ensuring meaningful access by LEP persons is effective communication. An agency or provider can ensure effective communication by developing and implementing a language assistance program that includes policies and procedures for identifying and assessing the language needs of its LEP clients/applicants, and that provides for an array of language assistance options, notice to LEP persons of the right to receive language assistance free of charge, training of staff, periodic monitoring of the program, and translation of certain written materials.

The Office for Civil Rights (OCR) is the federal agency responsible for enforcing Title VI. OCR recognizes that covered entities vary in size, the number of LEP clients needing assistance, and the nature of the services provided. Accordingly, covered entities have some flexibility in how they address the needs of their LEP clients. (In other words, it is understood that one size language assistance program does not fit all covered entities.)

The **starting point** for covered entities to determine the extent of their obligation to provide LEP services is to apply a four-factor analysis to their organization. It is important to understand that the flexibility afforded in addressing the needs of LEP clients *does not diminish* the obligation covered entities have to address those needs.

Examples of practices that may violate Title VI include:

- Limiting participation in a program or activity due to a person's limited English proficiency;
- Providing services to LEP persons that are more limited in scope or are lower in quality than those provided to other persons (such as then there is no qualified interpretation provided);
- Failing to inform LEP persons of the right to receive free interpreter services and/or requiring LEP persons to provide their own interpreter;
- Subjecting LEP persons to unreasonable delays in the delivery of services.

BIDDER STEP #1 – Individualized Assessment Using Four-Factor Analysis

The four-factor analysis helps an organization determine the right mix of services to provide to their LEP clients. The right mix of services is based upon an individualized assessment, involving the balancing of the following four factors.

- (1) The **number** or proportion of LEP persons served or likely to be encountered in the population that is eligible for the program;
- (2) The **frequency** with which LEP individuals come in contact with the program, activity or service;
- (3) The **importance** or impact of the contact upon the lives of the person(s) served by the program, activity or service;
- (4) The **resources** available to the organization to provide effective language assistance.

This addendum was created to facilitate bidders' application of the four-factor analysis to the services they provide. At this stage, bidders are not required to submit their four-factor analysis as part of their proposal. **However, successful bidders will be required to submit a detailed description of the language assistance services they will provide to LEP persons to ensure meaningful access to their programs and/or services, within 10 days of the date the contract is approved by Governor and Council.** For further guidance, please see the Bidder's Reference for Completing the Culturally and Linguistically Appropriate Services (CLAS) Section of the RFP, which is available in the Vendor/RFP Section of the DHHS website.

Important Items to Consider When Evaluating the Four Factors.

Factor #1 The number or proportion of LEP persons served or encountered in the population that is eligible for the program.

Considerations:

- The eligible population is specific to the program, activity or service. It includes LEP persons serviced by the program, as well as those directly affected by the program, activity or service.
- Organizations are required not only to examine data on LEP persons served by their program, but also those in the community who are *eligible* for the program (but who are not currently served or participating in the program due to existing language barriers).
- Relevant data sources may include information collected by program staff, as well as external data, such as the latest Census Reports.
- Recipients are required to apply this analysis to each language in the service area. When considering the number or proportion of LEP individuals in a service area, recipients should consider whether the minor children their programs serve have LEP parent(s) or guardian(s) with whom the recipient may need to interact. It is also important to consider language minority populations that are eligible for the programs or services, but are not currently served or participating in the program, due to existing language barriers.
- An effective means of determining the number of LEP persons served is to record the preferred languages of people who have day-to-day contact with the program.
- It is important to remember that the *focus* of the analysis is on the lack of English proficiency, not the ability to speak more than one language.

Factor #2: The frequency with which LEP individuals come in contact with the program, activity or service.

- The more frequently a recipient entity has contact with individuals in a particular language group, the more likely that language assistance in that language is needed. For example, the steps that are reasonable for a recipient that serves an LEP person on a one-time basis will be very different from those that are expected from a recipient that serves LEP persons daily.
- Even recipients that serve people from a particular language group infrequently or on an unpredictable basis should use this four-factor analysis to determine what to do if an LEP person seeks services from their program.
- The resulting plan may be as simple as being prepared to use a telephone interpreter service.
- The key is to have a plan in place.

Factor #3 The importance or impact of the contact upon the lives of the person(s) served by the program, activity or service.

- The more important a recipient's activity, program or service, or the greater the possible consequence of the contact to the LEP persons, the more likely language services are needed.
- When considering this factor, the recipient should determine both the importance, as well as the urgency of the service. For example, if the communication is both important and urgent (such as the need to communicate information about an emergency medical procedure), it is more likely that immediate language services are required. If the information to be communicated is important but not urgent (such as the need to communicate information about elective surgery, where delay will not have any adverse impact on the patient's health), it is likely that language services are required, but that such services can be delayed for a reasonable length of time.

Factor #4 The resources available to the organization to provide effective language assistance.

- A recipient's level of resources and the costs of providing language assistance services is another factor to consider in the analysis.
- Remember, however, that cost is merely one factor in the analysis. Level of resources and costs do not diminish the requirement to address the need, however they may be considered in determining how the need is addressed;
- Resources and cost issues can often be reduced, for example, by sharing language assistance materials and services among recipients. Therefore, recipients should carefully explore the most cost-effective means of delivering quality language services prior to limiting services due to resource limitations.

BIDDER STEP #2 - Required Questions Relating to Language Assistance Measures

I certify that I have completed the four-factor analysis as part of my process for creating the best possible proposal, in response to the RFP.

Signature: _____

Print Name and Title: _____

Taking into account the four-factor analysis, please answer the following questions in the six areas of the table below. (**Do not** attempt to answer the questions until you have completed the four-factor analysis.) The Department understands that your responses will depend on the outcome of the four-factor analysis. The requirement to provide language assistance does not vary, but the measures taken to provide the assistance will necessarily differ from organization to organization.

1. IDENTIFICATION OF LEP PERSONS SERVED OR LIKELY TO BE ENCOUNTERED IN YOUR PROGRAM		
a. Do you make an effort to identify LEP persons served in your program? (One way to identify LEP persons served in your program is to collect data on ethnicity, race, and/or preferred language.)	Yes	No
b. Do you make an effort to identify LEP persons likely to be encountered in the population eligible for your program or service? (One way to identify LEP persons likely to be encountered is by examining external data sources, such as Census data)	Yes	No
c. Does you make an effort to use data to identify new and emerging population or community needs?	Yes	No
2. NOTICE OF AVAILABILITY OF LANGUAGE ASSISTANCE		
Do you inform all applicants / clients of their right to receive language / communication assistance services at no cost? (Or, do you have procedures in place to notify LEP applicants / clients of their right to receive assistance, if needed?) <u>Example:</u> One way to notify clients about the availability of language assistance is through the use of an "I Speak" card.	Yes	No
3. STAFF TRAINING		
Do you provide training to personnel at all levels of your organization on federal civil rights laws compliance and the procedures for providing language assistance to LEP persons, if needed?	Yes	No
4. PROVISION OF LANGUAGE ASSISTANCE		

<p>Do you provide language assistance to LEP persons, free of charge, in a timely manner? (Or, do you have procedures in place to provide language assistance to LEP persons, if needed) In general, covered entities are required to provide two types of language assistance: (1) oral interpretation and (2) translation of written materials. Oral interpretation may be carried out by contracted in-person or remote interpreters, and/or bi-lingual staff. <u>(Examples of written materials you may need to translate include vital documents such as consent forms and statements of rights.)</u></p>	Yes	No
5. ENSURING COMPETENCY OF INTERPRETERS USED IN PROGRAM AND THE ACCURACY OF TRANSLATED MATERIALS		
<p>a. Do you make effort to assess the language fluency of all interpreters used in your program to determine their level of competence in their specific field of service? (Note: A way to fulfill this requirement is to use certified interpreters only.)</p>	Yes	No
<p>b. As a general rule, does your organization avoid the use of family members, friends, and other untested individual to provide interpretation services?</p>	Yes	No
<p>c. Does your organization have a policy and procedure in place to handle client requests to use a family member, friend, or other untested individual to provide interpretation services?</p>	Yes	No
<p>d. Do you make an effort to verify the accuracy of any translated materials used in your program (or use only professionally certified translators)? (Note: Depending on the outcome of the four-factor analysis, N/A (Not applicable) may be an acceptable response to this question.</p>	Yes	No
6. MONITORING OF SERVICES PROVIDED		
<p>Does you make an effort to periodically evaluate the effectiveness of any language assistance services provided, and make modifications, as needed?</p>	Yes	No
<p>If there is a designated staff member who carries out the evaluation function? If so, please provide the person's title: _____</p>	Yes	No

AFFIRMATIONS

I understand that Title VI of the Civil Rights Act of 1964 requires me to take reasonable steps to ensure meaningful access to ***all*** LEP persons to all programs, services, and/or activities offered by my organization.

SIGN

I understand that, if selected, I will be required to submit detailed description of the language assistance services I will provide to LEP persons to ensure meaningful access to programs and/or services, within 10 days of the date the contract is approved by Governor and Council.

SIGN